Annual Report

Alberta Hospitals and Medical Care

Alberta
HOSPITALS AND
MEDICAL CARE

88-02338/

December, 1987

The Honourable Dr. David J. Carter
Speaker of the Legislative Assembly of Alberta

Sir:

I have the honour to present the ninth Annual Report of the Department of Hospitals and Medical Care, covering the fiscal year ended March 31, 1987.

Respectfully submitted,

Marvin E. Moore
Minister of Hospitals
and Medical Care

December, 1987

The Honourable Marvin E. Moore
Minister of Hospitals and Medical Care
423 Legislature Building
Edmonton, Alberta
T5K 2B6

Sir:

I have the honour to present the ninth Annual Report of the Department of Hospitals and Medical Care. This information covers the fiscal year ended March 31, 1987.

Further statistical information on the operations of the Department can be found in the Alberta Health Care Insurance Plan Statistical Supplement and the Hospital Services Division Statistical Supplement, which are published separately.

Respectfully submitted,

Alex McPherson, M.D.
Deputy Minister of Hospitals
and Medical Care

Table of Contents

Summary of Major Activities 1
Financial and Statistical Highlights 5
Legislation 7
Organizational Chart 11
Alberta Health Care Insurance Plan 13
- Plan Description 13
- Benefits of the Plan 13
- Basic Health Services 13
- Premium Assistance Program 14
- Extended Health Benefits 14
- Alberta Blue Cross Non-Group Membership 15
- Alberta Health Care Emergency Financial Assistance Program 15
- Financing of the Plan 15
- Benefit Expenditure 16
- Summary of Activities 17

Alberta Hospitalization Benefits Plan 19
- Plan Description 19
- Benefits of the Plan 19
- Summary of Activities 20
- Map of Active Treatment Facilities 22
- Hospitals by Location, Ownership and Approved Bed Complement (Table 1) 23
- Status of Capital Construction Projects (Table 2) 27

Alberta Nursing Home Plan 31
- Plan Description 31
- Benefits of the Plan 31
- Summary of Activities 31
- Nursing Homes by Location, Ownership and Bed Complement (Table 3) 32

List of Financial Information 35

Summary of Major Activities

Agreement Reached to End Extra Billing

The Government of Alberta reached agreement with the Alberta Medical Association to end extra-billing in the province effective October 1, 1986.

The passage of Bill 27 ensured that extra-billing by physicians would no longer be permitted for medically required insured health services. The $10 admission charge by hospitals to patients was also discontinued.

Also included in the agreement was a provision that a further medical service called the Extraordinary Medical Services Fund, be added to the fee schedule. This new concept provided an opportunity for a physician to make application to the Extraordinary Medical Services Assessment Fund (EMSAF) Committee for a payment above the fee schedule on demonstration that additional services and time commitment were provided and medically required.

The province also provided some assistance towards the establishment of a meaningful Disability Insurance Program for medical practitioners who are unable to practise medicine because of a disability. The agreement also provided for a process of negotiation between the provincial government and the Alberta Medical Association on an annual basis concerning the amount of funds provided by the government to the Alberta Health Care Insurance Plan. The agreement also contains provision for binding arbitration if there is failure to agree.

Another component of the agreement is the Good Faith Policy. If a physician believes that a patient, who cannot produce an Alberta Health Care registration number, is an Alberta resident, a claim can be submitted with a Residency Confirmation form and it will be processed.

As a result of the agreement to end extra-billing, the federal government forwarded $28,782,000 to Alberta in November, 1986. This money had previously been withheld for the 27 month period from July 1, 1984 to September 30, 1986, pending the end of extra-billing and hospital user charges in the province. Of this payback amount, $22,953,000 related to extra-billing by physicians and oral surgeons and $5,829,000 related to hospital user charges. The extra-billing payback amount of $22,953,000 represented approximately 1.8 per cent of the expenditures for medical (fee-for-service) and oral surgery benefits provided during the withholding period.

"Good Health is Everybody's Business" Campaign Launched

In keeping with the Minister's goal of making Albertans more aware of the rising cost of health care, an advertising program entitled "Good Health is Everybody's Business" was launched. The campaign was designed both to raise the level of public awareness in terms of Alberta's increasing health care budget and to provide some practical tips on healthier life-style choices.

Heart and Heart/Lung Transplantation Program Approved

In May of 1986, the provincial government approved a program for heart and heart/lung transplants for Edmonton.

The Walter C. Mackenzie Health Sciences Centre, University of Alberta Hospitals, was designated as Western Canada's first heart and heart/lung transplantation centre. Funding was provided to the program to enable the hospital to perform at least 12 transplants in the first year.

The program provides heart and heart/lung transplantation services for patients from Alberta and other western provinces who have advanced forms of end-stage heart and/or lung disease and who would otherwise have no realistic hope for extension of life.

Nursing Home Review Panel Recommendation Implemented

In keeping with the recommendation of the Alberta Nursing Home Review Panel and the Nursing Home Liaison Committee that over a period of time, the daily accommodation fee charged to residents of long-term care facilities be brought up to a level which would approximate the cost of room and board, a $4.00 per day increase in daily accommodation charges came into effect on January 1, 1987. The increase applies to nursing homes, auxiliary hospitals and mental health hospitals.

The increase brought nursing home residents' daily accommodation charges to $14.00 for standard, $16.50 for semi-private, and $20.25 for private accommodation. Auxiliary hospital residents who are hospitalized for longer than 120 days, are now charged $14.00 for a standard ward and $20.25 for private accommodation. The increase also applies to voluntary patients in mental health hospitals who are now charged a daily rate of $14.00 after 120 days of hospitalization.

The Alberta government's share of the daily rate for each resident varies according to the number of beds in the nursing home. As at March 31, 1987 the per diem was: up to 45 beds, $39.00; 46-90 beds, $37.50; over 90, $36.00. The government's average per diem payment for patients in auxiliary hospitals was $105.29.

New Mental Health Act Tabled

A new Mental Health Act, which will broaden the rights of involuntary psychiatric patients, was tabled in the spring sitting of the Legislature. Bill 3, when passed, will replace the existing Mental Health Act which was passed in 1972.

The Bill incorporates a number of recommendations of the Task Force to Review the Mental Health Act chaired by Richard Drewry, whose report was submitted in January 1983. The purpose of the Task Force was to undertake a major review of the mental health legislation and practices used in Alberta, compare them with those of other jurisdictions, and focus on the needs of society. The Task Force received written submissions, held public hearings and informal discussions, and carried out comparative research before presenting its report. In developing the new legislation, the government considered the public comments regarding the Task Force recommendations, as well as the program, policy and financial implications of those recommendations.

Units for Mentally Dysfunctioning Elderly Established

As part of the provincial government's continuing commitment to improve the long-term care system, the Minister announced three pilot geriatric units, designed to care for the special needs of the mentally dysfunctioning elderly, would be established at Lynnwood Extended Care Centre in Edmonton (25 beds), Calgary Bethany Care Centre in Calgary (30 beds) and Queen Elizabeth Health Centre in Grande Prairie (13 beds).

An older person who demonstrates acute and/or chronic impaired mental functioning particularly in coping with the necessary activities of daily living, that results in increased dependence on care providers is considered to be mentally dysfunctioning. These people may be suffering from chronic schizophrenia or manic-depression, depression of a lesser degree, or dementia, of which the most common form is Alzheimer's disease. Dementia patients form the largest category of mentally dysfunctioning elderly.

Grants to Active-Treatment Hospitals Adjusted

As part of the provincial government's overall financial goal of eliminating the budget deficit by 1990, it was announced that grants from the Government of Alberta to active treatment hospitals would be reduced by three per cent in the coming fiscal year.

Alberta Hospitals and Medical Care's total global operating budget for active treatment hospitals in 1986-87 was $1.27 billion. Approximately 80 per cent of the total global operating budget is designated for the 22 largest facilities in the province, while the balance is allocated among the remaining 105 hospitals.

New Divisions Established

Two new divisions were created within the Department on recommendation by the Management Systems Task Force. Comprised of staff from throughout the Department, the Task Force looked at ways to improve management practices and to coordinate many of the functions within the Department.

The resulting report recommended the establishment of a Corporate Development Division to coordinate management and planning functions, and of an Information Resource Management Division to coordinate systems and information needs. Both divisions came into existence November 1, 1986. The Information Resource Management Division consists of three branches:

Systems Development – responsible for computer systems development through project selection, management and implementation;

Systems Consulting Services – responsible for supporting all aspects of end-user computing within the Department, including education and training, technical support, consulting, information exchange, office automation, and the design, development and implementation of executive information systems;

Information Planning – responsible for the planning and information management function within the Department, including activities such as EDP policy development, security, evaluation, standards, database administration and EDP planning.

The Corporate Development Division operates through four new branches:

Personnel – retains many of the standard personnel functions, with the addition of formal human resource planning;

Training and Development Branch – responsible for corporate training and development policies, department training programs, and management, professional/ technical and skills training;

Management Services – primarily involved with developing an organizational management framework and assisting with the development of improved management practices;

Corporate Planning – manages, administers and evaluates an internal planning process for the Department.

Office Automation Continues

The Department has completed Phase II of its office automation project. The basic infrastructure to support an office automation network that extends across the entire Department is now largely in place.

DFS/CFS Financial System Adopted

The Department adopted and implemented the new Departmental Financial System/Central Finance System (DFS/CFS), developed by Treasury for processing Capital Fund Transactions which were previously paid from the General Revenue Fund. The work necessary for this conversion was completed in this fiscal year. DFS/CFS will also result in more efficient and effective systems within the Department and will allow for superior access to financial information.

New Health Care Payment System Implemented

As DFS/CFS is unable to handle the volume of payments processed by the Alberta Health Care Insurance Fund, the Health Care Payment System was implemented March 27, 1987. In addition to providing a more efficient means of processing payments, this system provides on-line access to payment details and a more effective means of recovering monies owed to the Fund by registrants and practitioners.

Agreement Reached on Peter Lougheed and Edmonton General Hospitals

Agreement was reached with the Calgary General Hospital Board to operate the Peter Lougheed General Hospital. This responsibility had previously rested with the Calgary District Hospital Group. The facility is scheduled to open in April, 1988 with a bed capacity of 296 active treatment beds and 56 bassinets. The Calgary General Hospital will reduce its capacity from 914 beds to 663 beds. The two hospitals will be operated as one facility located on two sites and administered by a single management structure.

Agreement was also reached with the Edmonton General Hospital Board of Management to administer the Grey Nuns Hospital in the Mill Woods area of Edmonton. The Grey Nuns Hospital will have 444 active treatment beds with a full range of services. The hospital's Jasper Avenue site will have 60 active treatment beds with ambulatory services, a 15-bed palliative care unit, and 423 auxiliary care beds. Its Geriatric Day Hospital program will also be expanded and a new 60-bed Mentally Dysfunctioning Elderly Unit will be established.

The two facilities are in the final stages of completion. Forecast capital expenditure for both facilities, as at March 31, 1987, was $224 million.

During the planning and design stages of this project, over 200 users from major acute care facilities in Alberta provided advice on the design and equipment procurement.

Bed Conversion Policy for Community Based Hospitals Established

In keeping with the commitment to allow hospital boards greater flexibility in responding to the needs of the community, a Bed Conversion Policy for community-based hospitals was established. Because of the rising number of elderly, community-based hospitals may now request conversion of some, or all, existing active treatment beds to long-term care use if there is a recognized need for auxiliary or nursing home beds in the district.

New Surplus/Deficit Policy For Hospitals Established

As a major step towards allowing hospital boards greater flexibility in managing budgets, a new Surplus/Deficit Policy was established. The maximum retention levels of one per cent or $25,000 per year and 10 per cent or $250,000 overall accumulated surplus were removed. Effective April 1, 1986, recoveries are to take place when surpluses are attributable to overpayments, or when there is a reduction or transfer of services, programs or activities that have not been approved.

Financial and Statistical Highlights

FINANCIAL HIGHLIGHTS

During the 1986-87 fiscal year the Department's total expenditure on health care and hospitals was $2.901 billion as follows:

	1986/87
Departmental Support Services	$ 40,821,954
Financial Assistance for Active Treatment Care	1,436,904,994*
Financial Assistance for Long-Term Chronic Care	188,835,718*
Financial Assistance for Supervised Personal Care	125,509,013*
Sub-total General Revenue Fund	1,792,071,679**
Health Care Insurance Fund — Gross Expenditure	834,823,659
Capital Fund Construction of hospitals and nursing homes	237,660,164
Heritage Savings Trust Fund — Research and Capital Projects	36,818,275
TOTAL	$2,901,373,777

* Excludes capital debt repayment amounts of $9,833,934, $519,735 and $14,923 for Active Treatment Long-Term Chronic and Supervised Personal Care respectively.

** Excludes the Provincial Contribution to the Health Care Insurance Fund.

The overall expenditure per capita for hospitals and medical care was $1,178.45, a 7.5 per cent increase from the previous year's $1,096.38. (Note: the previous year's figure has been restated to conform to 1986/87 calculation). Number of Alberta insured persons as at March 31, 1987, for use in calculating the overall expenditure per capita, is 2,462,017.

The Government of Canada contributed $495,016,686 (including prior year adjustments and recovery of penalties under the Canada Health Act) towards Medicare and Hospital Insurance programs. Contributions are received by the Department and Alberta Treasury pursuant to provisions of the Federal-Provincial Fiscal Arrangements and Established Programs Financing Act, 1977 (Canada), as amended, and are subject to adjustment. These contributions are in addition to the federal tax-point transfers.

Approved capital funding for hospitals and nursing homes (including Alberta Heritage Savings Trust Fund projects) in the planning phase or under construction totalled an estimated value in excess of $2.3 billion. Of this multi-year program commitment, $1.1 billion had been advanced by March 31, 1987, representing 47.8 per cent of the total.

Expenditures for basic health services under the Alberta Health Care Insurance Plan totalled $677.6 million, a 10.8 per cent increase from the $611.3 million in the previous year. Alberta Health Care's average expenditure of benefits for basic health services increased 10.0 per cent to $275.21 per person.

Expenditures totalled $33.5 million for the Extended Health Benefits Program, under which a registrant or spouse aged 65 years or older and their dependants, and widows and widowers receiving the Alberta Widows' Pension and their dependants, are entitled to receive certain dental and optical benefits. This represented an increase of 14.3 per cent from $29.3 million of expenditures made under the program the previous year. The average cost per person was $139.72.

The Department was responsible for the expenditure of $5,387,096 for air medical evacuation provided for patients through the Emergency Air Ambulance Service. The average cost for the 3,215 patients was $1,675.61 per trip.

STATISTICAL HIGHLIGHTS

The number of persons covered under the Alberta Health Care Insurance Plan increased 0.77 per cent to 2,462,017 from 2,443,244 and the number of registrations increased 1.38 per cent to 1,122,744 from 1,107,481.

The number of registrations under Alberta Blue Cross Non-Group coverage increased 3.11 per cent to 251,615 from 244,017 and the number of persons covered increased 2.74 per cent to 458,119 from 445,917.

The number of registrants eligible for coverage according to residency and who were issued health care cards as of July 1, 1986 increased 1.88 per cent to 1,058,553 from 1,039,022. The number of registrations cancelled pending confirmation of residency decreased 17.61 per cent to 19,563 from 23,743.

The number of physicians submitting claims to Alberta Health Care increased 3.43 per cent to 3,676 from 3,554.

The number of claims received by Alberta Health Care increased 5.82 per cent to 28,496,740 from 26,928,559.

There are currently 125 general hospitals in the province, as in the previous year. The total bed complement decreased to 13,018 from 13,064.

The total number of auxiliary hospitals throughout the province is 46 compared to 44 for 1985/86. The total bed complement increased to 4,272 from 4,243.

The total number of nursing homes is 88 compared to 87 for 1985/86. The total bed complement increased to 7,868 from 7,808.

CHANGES TO THE ACT

Alberta Health Care Insurance Act

Amendments:

Amended to end extra-billing – Opting in and out of Alberta Health Care Insurance Plan Amends Section 5 by adding sections 5.1, 5.2; amends section 6 by adding clause (h.1); amends section 12(1); amends section 35 by adding subsections (2) and (3); repeals section 10 and 13(2)(a).

Changes To The Regulations

Alberta Health Care Insurance Regulation (AR 216/81)

Amendments:

Amends sections 1 and 21 – Clarify the meaning of 'insured services' and make it clear that it is those services that are provided by a dental surgeon for which benefits are payable under the Dental Benefits Regulation as opposed to some other regulation. (AR 320/86)

Alberta Hospitalization Benefits Regulation (AR 355/73)

Amendments:

Amends section 9 – In order to comply with the Canada Health Act, the $10.00 general hospital admission charge has been eliminated effective October 1, 1986. (AR 321/86)

Amends section 9 – Increases the accommodation charge, from $10.00 to $14.00, in auxiliary hospitals to coincide with that of nursing homes effective January 1, 1987. (AR 343/86)

Amends sections 21.1 and 21.3 – The requirement to refund to the government surplus funds exceeding the maximum retention levels of one per cent or $25,000 per year and 10 per cent or $250,000 overall accumulated surplus was removed for the fiscal year beginning April 1, 1986 and future fiscal years. Notwithstanding anything in this regulation, section 21.1 of the Alberta Hospitalization Benefits Regulation (AR 355/73) as it read immediately before the coming into force of this regulation shall be deemed to continue in force with respect to the 1983/84, 1984/85 and 1985/86 hospital operating surpluses. (AR 49/87)

By-laws of the College of Physicians and Surgeons of Alberta (AR 342/78)

Amendments:

Adds section 39.1 (1) – Ownership and Operation of a Non-Hospital Treatment Facility and a Non-Hospital Medical Diagnostic Facility. (AR 316/86)

Chiropractic Benefits Regulation (AR 23/83)

Amendments:

Amends sections 3 and 4 – Increase for chiropractic benefits for basic health services provided under the Alberta Health Care Insurance Plan, was approved, effective April 1, 1986. The benefit for a visit increases from $11.50 to $12.00 and the benefit for X-rays increases from $19.00 to $19.90. The maximum annual benefit limits also increased for a single registrant from $192.00 to $200.00 while the limit for a registrant together with his dependants will increase from $384.00 to $400.00 for a benefit year. (AR 107/86)

Dental Benefits Regulation (AR 314/86)

Amendments:

Filed new regulation (AR 148/86) in respect of benefits payable for insured services provided by a dental surgeon inside or outside Alberta, effective April 1, 1986 and repeals the Dental Benefits Regulation. (AR 24/83)

Filed new regulation (AR 314/86) in respect of benefits payable for insured services provided by a dental surgeon inside or outside Alberta, effective October 1, 1986 and repeals the Dental Benefits Regulation. (AR 148/86)

Extended Health Services by Dental Mechanics Benefits Regulation (AR 259/85)

Amendments:

Amends Sections 2 and 3 – In reference to benefits payable for extended health services provided by a dental mechanic inside or outside Alberta to a resident and his dependants – replaces the reference to "registrant" with "resident". The Schedule (description of goods and services) is repealed and substituted, effective April 1, 1986. (AR 126/86)

Extended Health Benefits Payable to Dental Surgeons Regulation (AR 25/83)

Amendments:

The dental benefits follows section 8 – are repealed and the benefits set out in the Schedule are substituted, effective April 1, 1986. (AR 108/86)

Extended Health Benefits Payable to Optometrists Regulation (AR 110/86)

Filed new regulation (AR 110/86) in respect of benefits payable for goods and services provided by an optometrist inside or outside Alberta effective April 1, 1986 and repeals the Extended Health Benefits Payable to Optometrists Regulation. (AR 28/83)

Extended Health Benefits Payable to Ophthalmic Dispensers Regulation (AR 109/86)

Filed new regulation (AR 109/86) in respect of benefits for goods and services provided by an ophthalmic dispenser inside or outside Alberta effective April 1, 1986 and repeals the Extended Health Benefits Payable to Ophthalmic Dispensers Regulation. (AR 26/83)

Health Insurance Premiums Regulation (AR 217/81)

Amendments:

Amends sections 10(2), 31(3)(d), 33(2) (3) Repeals section 1 (4) – To remove redundant provisions regarding the concept of being "temporarily absent from Alberta" in reference to Missionaries as it is presently covered in section 1 (2) of the Alberta Health Care Insurance Regulation. (AR 39/87)

Medical Benefits Regulation (AR 106/86)

Amendments:

Filed new regulation (AR 106/86) and repeals the Medical Benefits Regulation. (AR 178/85)

Amends sections 4(1), 5(2), 11, 12, 21, repeals sections 17 – list of new benefit rates effective October 1, 1986 relating to the de-insuring of certain services in the Schedule of Medical Benefits in reference to the termination of extra-billing. (AR 315/86)

Medical Profession By-Laws (AR 322/86)

Filed new regulation (AR 322/86) – Medical Profession By-laws. Deletes section 8 and 9 from the Appendix of previous Medical Profession By-laws so that By-laws are in effect until amended or replaced. (AR 322/86)

Mental Health Regulation (AR 119/73)

Amendments:

Amends section 20 – Increases the accommodation charge from $10.00 to $14.00 in mental health facilities to coincide with that of nursing homes effective January 1, 1987. (AR 344/86)

Mental Health Hospitals Regulation (AR 436/82)

Amendments:

Amends sections 12 and repeals section 16 Amended to maintain consistency between the Alberta Hospitalization Benefits Regulation and the Mental Health Hospitals Regulation re: surplus, deficits and discretionary revenue – section 12 which deals with the circumstances as to when the Minister would recover money from hospitals has been repealed and replaced with a new policy. Notwithstanding anything in this regulation, section 12 of the Mental Health Hospitals Regulation (AR 436/82) as it read immediately before the coming into force of this regulation shall be deemed to continue in force with respect to excess revenue in the 1985/86 and previous fiscal years. Section 16 has been repealed as it deals with funding of bad debts which is now dealt with by the individual facilities. (AR 71/87)

Nursing Homes Operation Regulation (AR 258/85)

Amendments:

Amends Section 2(1) – Clause (b) repealed and substituted – categories for per diem rates revised into three new designations (45 or fewer beds, 46 to 90 beds, 91 or more beds) so as to omit any reference as to "district" or "non-district" nursing homes; and implements new per diem rates accordingly effective April 1, 1986. (AR 56/87)

Amends sections 2(1)(b) and 3(1) – Per diem rates for each category reduced by $4.00 and

increases the accommodation charge for each category by $4.00 effective January 1, 1987. (AR 60/87)

Nursing Profession Act – General Amendment Regulation (AR 454/83)

Amendments:

Amends section 6 (1) (a) and (b) – by adding "or certified mail" after "registered mail" – in order that notices served under the Act will allow the use of certified mail. (AR 418/86)

Nursing Profession Act – Regulations and By-law Approval Amendment Regulation (AR 355/83)

Repeals section 6 – in order that the regulation will continue in effect until it is amended or repealed. (AR 419/86)

Optometric Benefits Regulation (AR 27/83)

Amendments:

Amends Section 3 – An increase has been approved from $23.75 to $24.85 for an oculo-visual assessment including refraction and writing of prescription for the fitting of glasses when this service is provided by an optometrist as a basic health service under the Alberta Health Care Insurance Plan, effective April 1, 1986. (AR 111/86)

Physical Therapy Benefits Regulation (AR 303/85)

Amendments:

Amends sections 3, 3(1), 2(a)(b) of the Schedule – Increase in benefits payable for physical therapy services provided by a physical therapist in and outside of Alberta: increases a benefit for each day from $18.70 to $19.60; increases the benefit payable in a benefit period for a resident who has no dependants from $192.00 to $200.00; increases the benefit payable in a benefit period for a resident and his dependants from $384.00 to $400.00.

The rates of Physical Therapy Benefits following section 9 are repealed and the rates set out in the Schedule are substituted. This regulation is effective April 1, 1986. (AR 112/86)

Podiatric Benefits Regulation (AR 29/83)

Amendments:

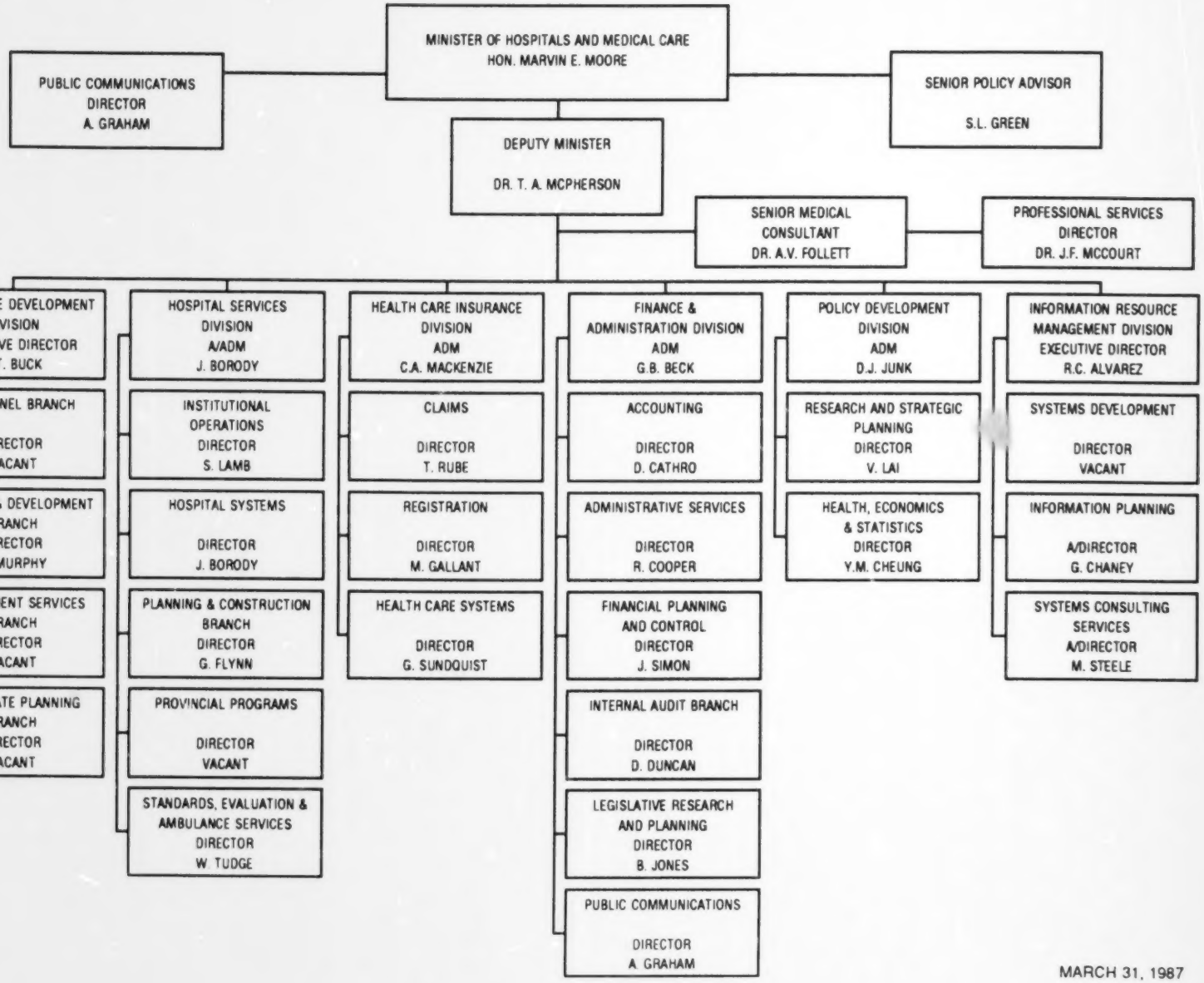
Amends section 3, section 5 repealed and substituted, section 16 repealed – Increase in benefits payable for goods and services provided by a podiatrist inside or outside Alberta; increases the benefit payable in a benefit period for a registrant who has no dependants from $192.00 to $200.00; increases the benefit payable in a benefit period for a registrant together with his dependants from $384.00 to $400.00. If services provided to the same patient by the same podiatrist, items B301D, B304 and similar major initial visit services will not be payable more frequently than once in six months instead of once in each benefit period. Repeals the benefits following section 16 and substitutes the benefits set out in the schedule to this regulation. This regulation is effective April 1, 1986. (AR 127/86)

Physical Therapy Profession Act – General Regulation (AR 298/87)

Amendments:

Section 7 (2) repealed and substituted, section 8 amended, section 8(3) repealed – Ensures that persons having less than approved academic qualifications may practice in Alberta under certain supervision provisions. (AR 323/86)

ORGANIZATION CHART



MARCH 31, 1987

Alberta Health Care Insurance Plan

DESCRIPTION

The Alberta Health Care Insurance Plan operates under the authority of the Alberta Health Care Insurance Act and The Health Insurance Premium Act. It is a provincial government insurance plan which covers the costs of medical services and a number of related health care services for registered Alberta residents and their dependants.

Most employers arrange to register their employees and the employees' dependants through a group plan. People who are self-employed – and all others – register by applying directly to Alberta Health Care.

BENEFITS

Benefits are paid on a fee-for-service basis according to an approved schedule of benefits. Payments are made to registered residents of Alberta or, on their behalf, directly to practitioners. As of March 31, 1987 all Albertans registered with Alberta Health Care are entitled to the following:

Basic Health Services:

- —medically required services of general practitioners and specialists;
- —specified oral surgical procedures carried out by dental surgeons;
- —optometric services restricted to one eye examination, including refraction and the writing of a prescription for the fitting of glasses, in each benefit period* and limited to a maximum of $24.85. Benefits for more than one eye examination may be covered in a given period if the optometrist satisfies Alberta Hospitals and Medical Care that more than one assessment is required. Alberta Health Care does not pay for the fitting or cost of glasses;
- —chiropractic services to a maximum of $12.00 for each visit with a limit during each benefit period* of $200.00 for single residents and $400.00 for those with one or more dependants. This coverage includes $19.90 for X-rays for each particular disability;
- —approved podiatric services and appliances. There is a limit during each benefit period* of $200.00 for single residents and $400.00 for those with one or more dependants;
- —physical therapy services to a daily maximum of $19.60 per person, with a limit during each benefit period* of $200.00 for single residents and $400.00 for those with one or more dependants. These limits are waived for cases which are considered a continuation of in-patient hospital care under the joint referral of the attending physician and hospital physical therapy department, and for persons eligible for Extended Health Benefits.

* A benefit period consists of 12 months, beginning the first of each July and running until the end of the following June.

Albertans registered with the Alberta Health Care Insurance Plan are also entitled to insured hospital services provided under the Alberta Hospitalization Benefits Plan which is covered separately in this Annual Report.

The monthly premium rates for the Alberta Health Care Insurance Plan as of March 31, 1987 are:

Regular Premium Rates	
Single	$14.00
Family	$28.00
Registrant or Spouse aged 65 and older	
Single or Family	NIL
Widows and Widowers receiving Alberta Widows' Pension	
Single or Family	NIL

The rates payable under the Schedules of Benefits for Basic Health Services were increased by 4.65 per cent effective April 1, 1986. Further increase in benefits for medical and oral surgical procedures were made effective October 1, 1986 to compensate Alberta physicians and dentists for the loss of extra billing privileges.

During the year, the number of persons covered by Alberta Health Care increased 0.77 per cent to 2,462,017 from 2,443,244 and the number of registrations increased 1.38 per cent to 1,122,744 from 1,107,481.

The number of group plans decreased 2.36 per cent to 12,768 from 13,077 and the number of persons under group coverage increased 0.66 per cent to 1,642,692 from 1,631,880. Included in the group figures are registrants 65 years of age and older and their spouses and dependants, widows and widowers receiving the Alberta Widows' Pension and their dependants, and registrants in receipt of an allowance under the Social Development Act.

Registrants who chose to opt out of Alberta Health Care at March 31, 1987 decreased by 26.42 per cent to 78 from 106 at March 31, 1986. This involved 233 people who were responsible for paying their own health services.

Other programs that fall under Alberta Health Care are as follows:

PREMIUM ASSISTANCE PROGRAM

Subsidized Premiums

Reduced premiums, based on a person's previous year's taxable income*, are available if the person qualifies and applies. The subsidy granted by the Alberta Health Care Insurance Plan applies to one benefit period only and ends each June 30. A new application must be made for each benefit period.

* Taxable income is total income less allowable deductions for income tax purposes.

The monthly rates for the premium subsidy program are:

Single:	Taxable income not more than $3,500	NIL
	Taxable income more than $3,500 but not more than $4,500	$7.00
Family:	Combined taxable income not more than $6,000	NIL
	Combined taxable income above $6,000 but not more than $7,500*	$14.00

* For family registration, taxable incomes of husband and wife are combined.

The number of registrants receiving coverage at reduced premium rates increased as follows:

	Registrations March 31, 1987	Registrations March 31, 1986
Complete Subsidy (based on taxable income)	118,785	115,071
Partial Subsidy (based on taxable income)	10,300	9,356
Total Subsidized Registrants	**129,085**	**124,427**

Waiver of Premiums

People who do not qualify for the Premium Subsidy Program and who are unable to pay their premiums due to current financial difficulties, may apply to Alberta Health Care to have their premiums temporarily waived. Eligibility is based on average monthly income over the three-month period just prior to the date the application is signed.

The qualifying levels are as follows:

Number of Persons Covered	Average Monthly Limits
1	$ 700.00
2	$1,200.00
3	$1,250.00

For each additional dependant, $50.00 is added.

The number of registrants in the social allowance recipient group who received premium-free coverage increased 16.26 per cent to 66,759 from 57,424 and the number of persons covered increased 12.48 per cent to 137,715 from 122,430.

The number of registrants who did not qualify for the 100 per cent subsidy or social allowance, yet were granted waiver of premium due to current financial difficulties, decreased 21.73 per cent to 9,439 from 12,060.

EXTENDED HEALTH BENEFITS

This program is provided free of charge to registrants aged 65 and older and their spouses and dependants, and for widows and widowers receiving the Alberta Widows' Pension and their dependants. The following benefits are paid in accordance with an approved schedule of rates:

—dental goods and services including restorative, surgical and prosthetic dental care and repairs to dentures. Not more than $1,200 is payable on behalf of one person for any two consecutive calendar years. A complete or partial dental plate or a reset for a given arch is payable only once in every five years and a reline or rebase once in every two years;

—optical goods and services prescribed following an eye examination or required to maintain the prescription. A benefit for new eyeglasses is not payable more than once in every three years unless the eyeglasses have been accidentally damaged beyond repair or a change of prescription is necessary following surgery affecting vision.

The Department of Community and Occupational Health was responsible for providing benefits for hearing aids and surgical and medical supplies and appliances.

The rates payable under the Schedules of Benefits for Extended Health Benefits were increased by 4.65 per cent effective April 1, 1986.

The number of registrants in the 65 years of age and older group who were exempted from premium

payments increased 3.63 per cent to 160,612 from 154,981 and the number of persons covered increased 3.55 per cent to 236,040 from 227,940.

The number of registrants with Alberta Widows' Pension coverage decreased 2.46 per cent to 3,527 from 3,616 and the number of persons covered decreased 3.51 per cent to 4,010 from 4,156.

ALBERTA BLUE CROSS NON-GROUP MEMBERSHIP

Coverage is available through Alberta Health Care on an individual (non-group) basis at special rates to residents who are unable to obtain Alberta Blue Cross coverage through an employer. Alberta Health Care also provides Alberta Blue Cross Non-Group membership at no cost to registrants aged 65 and older and their dependants, and to eligible widows and widowers age 55 to 64 and their dependants. Alberta Blue Cross Non-Group membership provides coverage for hospital differential charges for semi-private and private room care, ambulance services, prescribed drugs, appliances, home nursing, naturopathic services, clinical psychological services and dental care required because of an accident.

The monthly premium rates for Alberta Blue Cross Non-Group Membership as at March 31, 1987, are:

Regular Premium Rates	
Single	$ 6.60
Family	$13.20
Registrant or Spouse aged 65 or older	
Single or Family	NIL
Widows and Widowers receiving Alberta Widows' Pension	
Single or Family	NIL
Reduced Premium Rates	
Single	
Taxable income not more than $4,500	$ 4.70
Family	
Taxable income not more than $7,500*	$ 9.40

* For family registration, taxable income of husband and wife are combined.

The number of registrations under Alberta Blue Cross Non-Group coverage increased 3.11 per cent to 251,615 from 244,017 and the number of persons covered increased 2.74 per cent to 458,119 from 445,917.

ALBERTA HEALTH CARE EMERGENCY FINANCIAL ASSISTANCE PROGRAM

Under this program, a registrant can apply for special consideration to help in paying for insured health or hospital services received outside Alberta when costs exceed the benefits payable under the Alberta Health Care Insurance Plan. It applies:

—if the required services are not available in Alberta and the registrant has been referred by an Alberta physician, or

—if while temporarily absent from Alberta the registrant requires the services because of an emergency which could not have been reasonably foreseen or guarded against, or elective surgery, which according to the attending physician requires urgent treatment.

This program applies only if the excess costs place an undue burden on the registrant's financial resources.

During the fiscal year 1986/87 the number of applicants for Emergency Financial Assistance decreased by 10 per cent. The costs of the medical services increased by 23.75 per cent to $591,400 while hospital costs increased by 36.44 per cent to $1,877,243

Advancement in medical technology and techniques, and an increase in organ transplants, account for the percentage increase in medical services and hospital costs.

FINANCING

The Alberta Health Care Insurance Plan is financed by premiums, Government of Canada cash contributions and by a Government of Alberta grant to cover the remainder.

Premiums and interest financed 25.5 per cent of the cost of Alberta Health Care, compared to 28.0 per cent last year. Government of Canada cash contributions accounted for an additional 13.8 per cent of the cost as compared with 15.4 per cent for the previous year. The remaining 60.7 per cent was funded by a grant from the Government of Alberta. Last year this grant covered 56.6 per cent.

Since April 1, 1977, Government of Canada contributions to the provinces have been in the form of transfer of tax points and direct cash payments. Prior to May, 1984, the cash contribution to Alberta respecting medical care was paid directly to the Health Care Insurance Fund by the federal government. Since May 1984, however, the cash

contributions for hospital insurance and medical care have been combined and paid directly to the provincial General Revenue Fund by the federal government. The medical care portion of the cash contribution has been transferred to the Health Care Insurance Fund.

BENEFIT EXPENDITURE*

Total expenditures for Basic Health Services (provided in and outside of Alberta) increased by 10.8 per cent to $677.6 million from $611.3 million in 1985/86. Included were fee-for-service payments, as well as payments in respect of medical practitioners on salary, sessional and contract arrangements ($3,422,992).

Fee-for-service expenditures for Basic Health Services and their percentage changes over the previous year were:

Medical	$601,074,053 a	10.09% increase of	$55,100,529
Oral Surgery	$ 17,855,190 a	32.38% increase of	$ 4,367,141
Chiropractic	$ 23,592,183 a	9.61% increase of	$ 2,067,531
Optometry	$ 10,154,283 an	11.66% increase of	$ 1,060,237
Podiatry	$ 3,125,971 an	8.27% increase of	$ 238,654
Physical Therapy	$ 18,336,778 a	22.01% increase of	$ 3,307,681
TOTAL	**$674,138,458 a**	**10.88% increase of**	**$66,141,773**

* The data presented in this section refer to expenditures on a date-of-service basis for each reporting year, as presented in the Financial Statements of the Health Care Insurance Fund.

Alberta Health Care's average cost of benefits for Basic Health Services increased 10.00 per cent to $275.21 per person.

The Workers' Compensation Amendment Act, 1981, and its consequential amendment to the Alberta Health Care Insurance Act effective January 1, 1982, transferred from the Workers' Compensation Board to the Health Care Insurance Fund the responsibility for paying benefits for Basic Health Services provided to injured workers coming under the Workers' Compensation Act. Subsequently, the Alberta Health Care Insurance Act and the Workers' Compensation Act were amended by the Alberta Health Care Statutes Amendment Act, 1983, assented to June 6, 1983, retroactive to January 1, 1982, to authorize the use of the Health Care Insurance Fund for the payments made on behalf of and recoverable from the Workers' Compensation Board. Payments for Workers' Compensation Board services have been excluded from the data relating to expenditures for Basic Health Services.

Fee-for-service expenditures for Extended Health Benefits and their percentage increases over the previous year were:

Dental	$20,730,835 a	14.45% increase of	$2,618,119
Denturists	$ 7,522,066 a	18.73% increase of	$1,186,793
Optometry	$ 2,550,243 a	4.85% increase of	$ 117,860
Ophthalmic Dispensers	$ 2,736,024 an	11.60% increase of	$ 284,409
TOTAL	**$33,539,168 a**	**14.34% increase of**	**$4,207,181**

Out-of-province hospital costs refer to expenditures made by the Alberta Health Care Insurance Plan to other provinces in Canada and other countries on behalf of the Alberta residents who receive hospital services (in-patient and out-patient) outside Alberta. Expenditures decreased by 12.80 per cent to $19,132,250 in 1986/87 from $21,939,583 in 1985/86.

Expenditures for Alberta Blue Cross Non-Group membership rose to $101,009,055 from $87,145,508, an increase of 15.91 per cent.

Sessional Payment Programs

Sessional payment arrangements, negotiated between the Department and individual hospitals, are an alternative form of physician remuneration on a program basis. Such an arrangement may be agreed to between a hospital and the Department in order to establish and maintain a specific program, e.g. psychiatric services and the Diagnostic Assessment and Treatment Centre of the Alberta Children's Hospital and geriatric services in the Youville Wing of the Edmonton General Hospital. Funding is also provided to two community health centres, one located in Calgary and the other in Edmonton.

During the reporting year, existing programs were reviewed and updated as necessary. The total amount of funding provided to the programs through the Alberta Health Care Insurance Plan was $3,422,992.

In addition, the Department also monitors and makes the payments on behalf of the mental health sessional payment program of the Department of Community and Occupational Health. These payments are later recovered from that department.

Incentive Payments Program

The purpose of this program is to encourage physicians to practise in rural communities by providing incentive payments. The program is designed to improve medical service accessibility throughout the province.

Expenditures for location incentives for 1986/87 are estimated at $1,293,688.

Continuing Medical Education

By agreement with the Department, the Alberta Medical Association administers a Continuing Medical Education Program which is funded by the Department. This provides an allowance for fee-for-service Alberta physicians who wish to continue their post-graduate medical education. Department funding for fiscal year 1986/87 totalled $1,678,804.

ALBERTA HEALTH CARE INSURANCE PLAN SUMMARY OF ACTIVITIES

Alberta Health Care Office Moves

The Alberta Health Care Insurance Plan's Edmonton office moved to its new location at 10025 Jasper Avenue on July 7, 1986. Alberta Health Care is currently completing plans to make greater use of modern computer technology for the registration of Alberta residents and the payment of premiums. To bring these changes on-stream would have called for extensive upgrading and renovations of the existing building. Rather than face the massive disruptions brought on by such an overhaul, the decision was made to find a newer, more modern facility.

Communications Training Implemented

A comprehensive training program for more than 300 Alberta Health Care staff was successfully completed. The program emphasized service orientation and involved face-to-face, written and oral communications. In order to provide continuity, the Training and Development branch, Corporate Development Division, began planning for an internal communications program for new personnel.

REAP Project Moves Ahead

The Department successfully tendered the development and operations contract for the Registration Eligibility and Premium System Project (REAP). The project represents the first time a government system of this magnitude will be developed and operated in the private sector.

Interprovincial Processing of Hospital Claims

In April 1986, Alberta Health Care hosted an interprovincial workshop dealing with improving the interprovincial billing process of hospital claims and discussing how new specialized services such as organ transplantation procedures might fit into this process.

Practitioner Information Retrieval System Project Completed

The Practitioner Information Retrieval System Development Project (PIRS) was completed. This system will provide information on practitioners in a more timely and effective manner that will allow departmental staff to review claims submitted by practitioners more efficiently.

Reciprocal Processing of Medical Claims

Alberta Health Care chaired an interprovincial working group charged with the responsibility of advising the Conference of Deputy Ministers of Health on the most practical way of implementing an interprovincial reciprocal billing process for medical claims. The working group's recommendations were approved in February of 1987. They proposed the initiation of an interprovincial billing mechanism which would pay bills at the rate charged in the province where the service was provided and thereby eliminate unnecessary complications faced by the public when they visited other provinces. All provinces are currently working at developing such a system for implementation in 1988.

Claims Redevelopment Project

The Claims Redevelopment Project is responsible for introducing new business initiatives and up-to-date technologies to the Alberta Health Care Insurance Plan claims system.

Additionally, an analysis of various options for patient authorization of claims was conducted.

The business strategy, which was introduced last year, was reviewed and an operational plan is being developed.

Steps Taken To Improve Service and Communication

With the intention of improving service to, and communications with, practitioners, the Claims Branch upgraded its telephone system and introduced a new field service component.

The new and more advanced phone equipment allows staff to better handle practitioner inquiries, which averaged 1,300 per week. Providing additional operational support was behind the appointment of four field service representatives, whose role includes conducting information seminars for practitioners and their office staff, making personal visits to practitioner offices to help clear up claims submission problems, and assisting with accreditation visits to service bureaux.

Alberta Hospitalization Benefits Plan

DESCRIPTION

The Alberta Hospitalization Benefits Plan operates under the authority of the Hospitals Act. This Plan provides for in-patient hospitalization services at standard ward level, and out-patient services in approved facilities to residents of Alberta who are registered under the Alberta Health Care Insurance Plan. Three types of hospitals fall under the Alberta Hospitalization Benefits Plan. They are:

General or Active Treatment Hospitals provide basic hospital services throughout the province. Specialist services are provided in larger, regional hospitals. Admission to a general hospital is by order of a physician.

At March 31, 1987, there were 125 general hospitals operating in Alberta, including 123 public general hospitals which were approved by the Minister of Hospitals and Medical Care, and two federal general hospitals. Twenty-three of these general hospitals operated long-term care beds.

The total capacity of all public and federal general hospitals was 13,018 adult and children beds (including 741 long-term care beds) providing a ratio of 5.5 beds per 1,000 population.

Auxiliary Hospitals provide care and treatment for patients with long-term or chronic illnesses, who require a less intensive level of care than is provided in general hospitals. For some patients, treatment results in rehabilitation to a point where they are able to return to the community or transfer to a nursing home or other residential facility. For others, nursing and medical care is provided for an extended period.

There were 46 auxiliary hospitals operating in the province at March 31, 1987, with total capacity of 4,272 beds. These beds, together with 741 beds in long-term care units in general hospitals, provided a ratio of 2.1 long-term care beds per 1,000 total population and 25.2 beds per 1,000 population 65 years of age and older.

Mental Health Hospitals provide psychiatric services to patients who are admitted by a physician. Acute care and long-term care are provided for adults. Special units are also available for psychogeriatric patients.

Two mental health hospitals, providing acute and long-term psychiatric care, had a total capacity of 1,072 beds at March 31, 1987, averaging 0.5 beds per 1,000 population.

BENEFITS

Alberta Hospitalization Benefits provide coverage for the following in-patient and out-patient services in the province's approved general, mental health and auxiliary hospitals:

In-Patient Services:

- —accommodation and meals at the standard or public ward level;
- —necessary nursing care;
- —diagnostic and treatment services;
- —drugs, medical preparations and routine surgical supplies provided and administered in a hospital;
- —transportation within the province between hospitals, and from a hospital to a nursing home when ordered by a physician, and
- —special services as ordered by a physician.

Out-Patient Services:

- —emergency treatment and, where available, day surgery;
- —diagnostic laboratory and radiological procedures;
- —specialized clinics, such as orthopedic and diabetic clinics;
- —physical therapy, occupational, speech, respiratory and psychiatric therapy.

Services not covered:

- —private or semi-private rooms when provided at the request of the patient;
- —transporting out-patients between hospitals;
- —artificial limbs and other external prosthetic appliances;
- —examinations for use by third parties;
- —drugs and medical preparations not considered necessary for treatment;
- —oxygen for use by patients of auxiliary hospitals after discharge or when away from hospitals for weekends;
- —drugs and other goods provided for use after a patient is discharged from a hospital, and
- —laboratory and X-ray services provided by another facility not approved by the Minister.

In Alberta, a $10.00 charge, levied upon admission to a general hospital except for those aged 65 years and older, their spouses and dependants, eligible widows and widowers aged 55-64 and their dependants, was

eliminated October 1, 1986. A co-insurance charge of $10.00 a day which was made when a stay in an auxiliary hospital exceeded 120 days was changed to $14.00 after 60 days, effective January 1, 1987.

Outside Canada, in-patient hospitalization benefits were provided in accordance with a schedule of rates based on the approved rate for standard ward care in Alberta at the same size and type of hospital. Out-patient hospitalization benefits were provided on the basis of the inter-provincial rates for the same services. Under special circumstances, residents were eligible to apply for help in paying excessive hospital costs incurred out-of-country through the Emergency Financial Assistance Program.

The Graduate Medical Education Program

Under this program the Department funds the salaries paid to interns and residents during their training at major Alberta teaching hospitals. As well, the Department provides stipends to medical undergraduates, who as clinical clerks, spend their final year before graduation working in a hospital environment. The Department also shares in the funding of geographic appointees. These are physicians who are members of the medical faculties of either the University of Calgary or the University of Alberta and who, while providing valuable services to patients in teaching hospitals, serve as clinical instructors in medical education.

During 1986/87, the number of departmentally funded positions for interns and residents remained at 663. Funding of the program was reviewed in cooperation with both medical faculties and all major teaching hospitals in the province, and department payments were adjusted in accordance with contractual agreements.

Emergency Air Ambulance Program

The Air Ambulance Program funds emergency air ambulance transportation to Alberta residents within and outside the province, by physician order:

- when referral is necessary because the required level of care is not available in the province, and
- when the level of care required is not available where the patient is hospitalized and the nearest place to provide the required level of care is located in Alberta.

The Department was responsible for the expenditure of $5,387,095.25 for air medical evacuation provided for patients through this program. The average cost for 3,215 patients was $1,676 per trip.

FUNDING

The Department provides funding for the operation of hospital facilities on a global basis. Capital funding is also provided for approved projects. The majority of contact with the facilities is through the Hospital Services Division with support from the Finance and Administration and the Policy Development Divisions (see organization chart).

Over the last eight years, the Department has undertaken a major hospital construction program throughout the province. During 1986/87, 37 facilities entered the planning stage, 11 commenced design, 17 facilities began construction, and two facilities were completed.

A complete listing of projects involved in these phases of development for 1986/87 can be found in Table 2.

Distribution of total expenditure by general, auxiliary and mental health facilities is found in the Financial Information section of the Annual Report.

HOSPITALIZATION BENEFITS PLAN SUMMARY OF ACTIVITIES

Designation Under the Mental Health Act

Three Calgary hospitals received designation under the Mental Health Act enabling these institutions to provide psychiatric services to involuntary patients. The hospitals are: Calgary General Hospital, Foothills Provincial General Hospital and the Holy Cross Hospital. Designation of these hospitals will increase access to psychiatric services for involuntary patients, strengthen the role of the active-treatment hospitals in providing mental health care and enable many involuntary patients to receive treatment in their own community.

Reconstruction Program Begins at Alberta Hospital Ponoka

Approval was received for Alberta Hospital Ponoka to proceed with a complete reconstruction program. Funding approval totalling $73,236,000 is being provided to allow for the total replacement of many of the hospital's aging and sub-standard buildings and for the retention and renovation of those capable of reuse. The project is approved in four phases. Phase I is the full completion of the activity and treatment centre. Phase II will see the 80-bed Brain Injury Unit Project proceed to the design and construction

stages. Phases III and IV involve planning for the remaining 320-bed in-patient psychiatric units.

Operational Review – University of Alberta Hospitals

A major operational review of the University of Alberta Hospitals was undertaken by an outside consultant with the objective of establishing a funding base for the 1987/88 fiscal year. The review process involved a number of reference hospitals of similar size from other parts of Canada. The project is now complete and productivity guidelines have been established for all levels of service and a funding base has been set for all levels of hospital activities.

Alberta
HOSPITALS AND
MEDICAL CARE
MARCH 1987
GENERAL HOSPITAL DISTRICT
GENERAL HOSPITAL
AMBULATORY CARE FACILITY (AC)
FEDERAL NURSING STATION (FN)
Multiple facilities are indicated (2)
Chateh (FN)
High Level
Fox Lake (FN)
Fort Vermilion
Fort Chipewyan (FN)
Manning
Fort McMurray
Peace River
Berwyn
Fairview
Spirit River
McLennan
Desmarais (AC)
Hythe
Beaverlodge
Grande Prairie
High Prairie
Valleyview
Slave Lake
Athabasca
Boyle
Loc La Biche
Cold Lake
Bonnyville
Grande Cache
Whitecourt
Barrhead
Westlock
Smoky Lake
Vilna
Glendon
St Paul
Elk Point
Mayerthorpe
Redwater
Willingdon
Lamont
Two Hills
Myrnam
Edson
Fort Saskatchewan
Stony Plain
St Albert
Edmonton (7)
Mundare
Vegreville
Vermilion
Islay
Lloydminster
Hinton
Devon
Leduc
Tofield
Viking
Drayton Valley
Breton
Wetaskiwin
Camrose
Jasper
Daysland
Killam
Wainwright
Rimbey
Ponoka
Bashaw
Galahad
Hardisty
Provost
Rocky Mountain House
Bentley
Lacombe
Eckville
Stettler
Castor
Red Deer
Innisfail
Elnora
Coronation
Consort
Sundre
Olds
Trochu
Didsbury
Three Hills
Hanna
Oyen
Drumheller
Banff
Canmore
Calgary (7)
Empress
Bassano
Turner Valley
Brooks
High River
Vulcan
Claresholm
Medicine Hat
Picture Butte
Taber
Coaldale
Bow Island
Fort Macleod
Lethbridge (2)
Municipality of Crowsnest Pass
Pincher Creek
Raymond
Magrath
Milk River
Cardston (2)

HOSPITALS BY LOCATION, OWNERSHIP AND APPROVED BED COMPLEMENT[1] as at March 31, 1987

TABLE 1

Location/Name	Ownership	Approved Bed Complement[2]		
		Adult and Children		Newborn Bassinets
		Acute	Auxiliary	
PUBLIC GENERAL HOSPITALS				
Athabasca General and Auxiliary	District	42	23	5
* Banff, Mineral Springs	Religious	46		10
* Barrhead General	District	58		14
Bashaw General	District	30		7
* Bassano General	District	25		3
* Beaverlodge Municipal	District	30		9
* Bentley General	District	10		1
Black Diamond, Oilfield General	District	25	23	4
* Bonnyville Health Centre	Religious	67		12
* Bow Island General	District	19	20	3
Boyle General	District	30		7
Breton General	District	27		7
* Brooks Health Centre	District	70		15
* Calgary, Alberta Children's Provincial General	Provincial	128		
* Calgary, Colonel Belcher	District	194	147	
* Calgary, Foothills Provincial General	Provincial	816		98
* Calgary General	Municipal	914		63
* Calgary, Holy Cross	District	532		82
* Calgary, Rockyview General	District	284		
* Calgary, Salvation Army Grace	Religious	100		50
* Camrose, St. Mary's	Religious	117		12
Canmore Municipal	District	49		8
* Cardston Municipal	District	60	34	14
* Castor, Our Lady of the Rosary	Religious	30		6
Cereal Municipal	District	9		2
* Claresholm General	District	43		6
* Coaldale Community	Lay Corp.	25		5
* Cold Lake, John Neil	District	45		8
Consort Municipal	District	20		6
* Coronation Municipal	District	25		4
* Crowsnest Pass General	District	41		6
Daysland General	District	30		7
Devon Civic	Municipal	25		4
* Didsbury, Mountain View Health Care Centre (General)	District	50		8
* Drayton Valley and District Health Complex	District	50	30	8
* Drumheller, Regional Health Complex (General Centre)	District	70		10
* Eckville Municipal	District	26		5
* Edmonton, Charles Camsell	District	365		26
* Edmonton, Cross Cancer Institute	Provincial	76		
* Edmonton General	Religious	605		57
* Edmonton, Glenrose Rehabilitation	Provincial	309		
* Edmonton, Misericordia	Provincial[3]	558		100
* Edmonton, Royal Alexandra	Municipal	933		131
* Edmonton, University of Alberta	Provincial	1,040	40	100
* Edson, St. John's	Religious	51		9
* Elk Point Municipal	District	32	10	4

TABLE 1 cont'd.

Location/Name	Ownership	Approved Bed Complement[a]		
		Adult and Children		Newborn Bassinets
		Acute	Auxiliary	
Elnora General	District	10		3
Empress Municipal	District	10		3
Fairview General	District	50		10
* Fort Macleod Health Care Centre	District	40		7
* Fort McMurray Regional	District	142		24
* Fort Saskatchewan General	District	50		7
Fort Vermilion, St. Theresa General	District	36		5
* Fox Creek Hospital	District	10		
Galahad General	District	40		9
Glendon Municipal	District	12		2
Grande Cache General	District	34		7
* Grande Prairie, Queen Elizabeth II	District	238	96	29
Grimshaw, Grimshaw/Berwyn and District	District	25		4
* Hanna General	District	50		9
Hardisty General	District	20		6
* High Level Community Health Centre	District	25		10
* High Prairie Regional Health Complex	District	75		16
* High River General	District	65		8
* Hinton General	District	40		12
* Hythe Municipal	District	10		3
* Innisfail Health Care Centre	District	35	40	6
Islay Municipal	District	8	20	
Jasper, Seton General	District	33		8
* Killam General	Religious	30		7
* Lac La Biche, William J. Cadzow	District	72	25	6
* Lacombe General	District	50		9
* Lamont, Archer Memorial	Religious	48	24	10
* Leduc General	District	35		8
* Lethbridge Regional (General Centre)	District	205		34
* Lethbridge, St. Michael's General	Religious	202		18
McLennan, Sacred Heart	District	61		6
* Magrath Municipal	District	26		6
* Manning Municipal	District	34		8
* Mannville Municipal	District	20	8	3
Mayerthorpe General	District	25		4
* Medicine Hat and District (General Centre)	District	290		42
Milk River, Border Counties General	District	27		4
* Mundare, Mary Immaculate	Religious	10	20	
Myrnam Municipal	District	20		8
* Olds Municipal	District	50	25	6
Oyen, Big Country	District	27	30	7
* Peace River Municipal	District	71		12
* Picture Butte Municipal	District	25		6
* Pincher Creek Municipal	District	40	20	6
* Ponoka General	District	50		11
Provost Municipal Health Care Centre	District	31		4
* Raymond General	District	25		6
* Red Deer Regional Hospital Centre	District	349		42

TABLE 1 cont'd.

Location/Name	Ownership	Approved Bed Complement[2]		
		Adult and Children		Newborn Bassinets
		Acute	Auxiliary	
*Redwater General	District	32		6
*Rimbey General	District	26		9
*Rocky Mountain House General	District	37	30	8
*St. Albert, Sturgeon General	District	100		17
*St. Paul, St. Therese General	District	45		
*Slave Lake General	District	39		7
Smoky Lake, George McDougall Memorial	District	25	23	6
*Spirit River, Central Peace General	District	42		6
*Stettler General	District	50		8
Stony Plain Municipal	District	27		7
Strathmore, Valley General Hospital and Extended Care Centre	District	25		4
*Sundre General	District	34		7
Swan Hills General	District	20		4
*Taber and District Health Care Complex (General)	District	44		8
*Three Hills Health Care Centre	District	25	23	6
Tofield Municipal	District	31		9
*Trochu, St. Mary's Health Care Centre	Religious	15	15	
*Two Hills Health Care Centre (General Centre)	District	32		4
Valleyview Health Centre	District	35		7
*Vegreville, St. Joseph's General	Religious	70		13
*Vermilion Health Care Complex	District	39	15	7
*Viking General	District	32		6
Vilna, Our Lady's	District	17		3
*Vulcan General	District	25		5
*Wainwright and District Health Care Complex (General Centre)	District	45		9
*Westlock, Immaculata	Religious	80		11
*Wetaskiwin General	District	135		16
*Whitecourt General	District	34		7
*Willingdon, Mary Immaculate	Religious	25		6
Sub-total 123 Public General Hospitals		12,198	741	1,603
FEDERAL GENERAL HOSPITALS				
Cardston, Blood Indian	Federal	29		
*Medley, Canadian Forces Hospital Cold Lake	Federal	50		10
Sub-Total 2 Federal General Hospitals		79		10
Total 125 General Hospitals		12,277	741	1,613

TABLE 1 cont'd.

Location/Name	Ownership	Approved Bed Complement[2]
MENTAL HEALTH HOSPITALS		
*Edmonton, Alberta Hospital	Provincial	648
*Ponoka, Alberta Hospital	Provincial	424
Total 2 Mental Health Hospitals		1,072
AUXILIARY HOSPITALS		
Barrhead	District	25
*Bonnyville Auxiliary Centre	Religious	30
*Brooks	District	25
*Calgary, Bethany Care Centre	Religious	417
*Calgary, Cross Bow	District	100
*Calgary, Dr. Vernon Fanning Extended Care Centre	District	300
Calgary, Foothills	Provincial	180
*Calgary, Glenmore Park	District	200
*Calgary, Sarcee	District	100
*Camrose, Bethany	Religious	50
Canmore	District	23
Carmangay, Little Bow	District	16
*Claresholm, Willow Creek-Claresholm	District	50
*Coronation, Coronation-Paintearth Auxiliary	District	23
*Didsbury, Mountain View Health Care Centre (Auxiliary)	District	50
*Drumheller, Regional Health Complex (Auxiliary Centre)	District	30
*Edmonton, Allen Gray	Lay Corp.	52
*Edmonton, Dickinsfield Extended Care Centre	District	200
*Edmonton, Good Samaritan	Religious	170
*Edmonton, Grandview Extended Care Centre	District	200
*Edmonton, Lynnwood Extended Care Centre	District	175
Edmonton, Millwoods Shepherd's Care Centre	Religious	72
Edmonton, Mewburn Veterans' Centre	Provincial	150
*Edmonton, Norwood Extended Care Centre	District	141
*Edmonton, St. Joseph's Hospital	Religious	198
Edmonton, St. Michael's Extended Care Centre	Lay Corp.	75
*Edmonton, Youville Geriatric Services	Religious	194
*High River	District	50
*Killam, Flagstaff	District	50
*Lacombe	District	25
*Lamont	District	50
*Lethbridge Regional Hospital (Rehabilitation Centre)	District	100
Lloydminster	District	50
*Medicine Hat and District (Auxiliary Centre)	District	136
*Peace River	District	50
Radway Health Care Centre	Municipal	20
*Red Deer, Dr. Richard Parsons	District	100
*Rimbey	District	45
*Stettler, Dr. A.E. Kennedy	District	50
*Taber & District Health Care Complex (Auxiliary Centre)	District	20
Two Hills Health Care Centre (Auxiliary Centre)	District	20
*Vegreville	District	50
*Wainwright and District Health Care Complex (Auxiliary Centre)	District	75
Westlock, Thorhild-Westlock	District	50
*Wetaskiwin	District	50
Whitelaw, Hotel-Dieu of St. Joseph	District	35
Total 46 Auxiliary Hospitals		4,272

NOTES:

* Indicates that the hospital is accredited by the Canadian Council on Hospital Accreditation.

(1) Excludes ambulatory care facilities.

(2) Number of beds and bassinets that the hospital was approved to accommodate at March 31, 1987.

(3) The Misericordia Hospital is operated by the Alberta Catholic Hospitals Foundation.

TABLE 2

STATUS OF CAPITAL CONSTRUCTION PROJECTS
as at March 31, 1987

LOCATION	NAME OF FACILITY	PROJECT	RATED BED CAPACITY Prior to Construction ACT	AUX	NH	Upon Completion ACT	AUX	NH	STATUS OF CONSTRUCTION
BANFF	Mineral Springs Hospital	Replacement	49	—	—	41	25	—	Construction
BASHAW	Bashaw General Hospital	Addition	32	—	—	25	—	25	Planning
BASSANO	Bassano General Hospital	Renovations and expansion	32	—	—	25	30	—	Planning
BLAIRMORE	Crowsnest Pass General Hospital	Replacement	62	—	66	40	20	40	Construction
CALGARY	Cross Bow Auxiliary Hospital	Replacement	—	100	—	—	100	—	Planning
	Foothills Provincial General Hospital	Renovations and consolidation							Construction
	Calgary General Hospital	Rejuvenation	914	—	—	663	—	—	Planning
	Holy Cross Hospital	Redevelopment	—	—	—	—	—	—	Planning
	Peter Lougheed General Hospital	New facility	—	—	—	346	—	—	Construction
	Rockyview General Hospital	Replacement and renovations	194	—	—	541	—	—	Construction
CAMROSE	Bethany Auxiliary Hospital	Replacement	—	50	100	—	70	127	Design
	St. Mary's Hospital	Replacement	121	—	—	122	—	—	Design
CLARESHOLM	Willow Creek-Claresholm Auxiliary	Replacement	—	50	—	—	50	50	Construction
COALDALE	Coaldale Community Hospital	Replacement and expansion	26	—	—	25	23	—	Planning
COLD LAKE	John Neil Hospital	Replacement	47	—	—	87	15	25	Completed
DAYSLAND	Dayslend General Hospital	Replacement	32	—	—	34	—	—	Planning
DRUMHELLER	Drumheller Gen. & Aux. Hosp. & N.H. District No. 3	Replacement and expansion	73	30	80	73	35	80	Planning
ECKVILLE	Eckville Municipal Hospital	Replacement and addition	27	—	—	26	—	24	Planning
EDMONTON	Alberta Hospital	Master Plan							Planning
	Charles Camsell Hospital	Renovations and addition	373	—	—	373	—	—	Planning

TABLE 2 cont'd.

LOCATION	NAME OF FACILITY	PROJECT	RATED BED CAPACITY Prior to Construction ACT	AUX	NH	Upon Completion ACT	AUX	NH	STATUS OF CONSTRUCTION
EDMONTON	W.W. Cross Cancer Institute	Renovations and expansion							Planning
	Edmonton General Hospital	Redevelopment							Planning
	Glenrose Rehabilitation Hospital	Replacement	309	—	—	273	—	—	Design
	Good Samaritan Auxiliary Hospital	Replacement	—	200	—	—	200	—	Construction
	Grey Nuns Hospital	New facility	—	—	—	474	—	—	Construction
	Misericordia Hospital	Addition	—	—	—	—	—	—	Design
	Northern Alberta Children's Hospital	New facility	—	—	—	—	—	—	Planning
	Royal Alexandra Hospital	Addition	—	—	—	—	—	—	Planning
	University of Alberta Hospital	Clinical Sciences Building Renovations							Planning
EDSON	St. John's Health Care Centre	Addition	51	—	50	51	15	50	Planning
ELK POINT	Elk Point Municipal Hospital	Addition	33	10	—	33	10	30	Planning
FAIRVIEW	Fairview General & Auxiliary Hospital	Addition of Auxiliary	53	—	40	53	25	40	Planning
GALAHAD	Galahad General Hospital	Renovation and upgrading	43	—	—	23	20	—	Planning
HINTON	Hinton General Hospital	Addition	44	—	—	44	25	—	Planning
INNISFAIL	Innisfail Health Care Centre	Addition	37	40	—	37	40	40	Planning
LACOMBE	Lacombe General Hospital	Addition	53	25	50	53	49	50	Planning
LA CRETE	La Crete Ambulatory Care Centre	New Facility	—	—	—	—	—	—	Design
LAMONT	Lamont Auxiliary & Nursing Home	Addition	—	50	31	—	50	56	Planning
LEDUC	Leduc General Hospital	Addition and renovations	37	—	—	110	—	—	Construction
LETHBRIDGE	Lethbridge Regional Hospital	Replacement	215	100	—	330	100	—	Construction
LLOYDMINSTER	Lloydminster Auxiliary Hospital	Replacement	—	50	75	—	50	75	Planning
LLOYDMINSTER	Lloydminster Hospital	Replacement	96	—	—	125	—	—	Construction
MANNING	Manning Municipal Hospital	Addition	36	—	—	36	30	—	Planning
MAYERTHORPE	Mayerthorpe General Hospital	Addition	26	—	—	26	30	—	Design

TABLE 2 Cont'd.

LOCATION	NAME OF FACILITY	PROJECT	RATED BED CAPACITY Prior to Construction ACT	AUX	NH	Upon Completion ACT	AUX	NH	STATUS OF CONSTRUCTION
MCLENNAN	McLennan General Hospital and Nursing Home District	Replacement and renovations	63	—	50	53	20	50	Construction
MEDICINE HAT	Medicine Hat & District (General Centre)	New facility and renovations	244	100	—	307	136	—	Design
PONOKA	Ponoka, Alberta Hospital	Brain Injury Unit							Design
	Ponoka, Alberta Hospital	New Activity and Treatment Ctr							Construction
	Ponoka, Alberta Hospital	Inpatient Psychiatry							Planning
	Ponoka General Hospital	Replacement and addition	53	—	—	54	30	—	Completed
RAYMOND	Raymond General Hospital	Addition	27	—	—	27	23	—	Planning
RIMBEY	Rimbey General Hospital	Addition	29	45	—	29	45	40	Planning
ROCKY MOUNTAIN HOUSE	Rocky Mountain House General	New Nursing Home	37	39	—	37	39	50	Planning
SLAVE LAKE	Slave Lake General Hospital	Addition	41	—	—	41	10	20	Design
SPIRIT RIVER	Central Peace General Hospital	Addition	44	—	—	44	25	35	Planning
ST. ALBERT	Sturgeon General Hospital	Replacement	105	—	—	200	—	—	Design
ST. PAUL	St. Therese General Hospital	Addition and renovations	81	—	—	81	30	—	Construction
STETTLER	Stettler General Hospital	Replacement and renovations	52	50	50	52	50	50	Construction
THORHILD – WESTLOCK	Thorhild Auxiliary and Nursing Home	New Nursing Home	—	—	—	—	—	50	Planning
TOFIELD	Tofield Municipal Hospital	Replacement	34	—	—	40	20	30	Construction

TABLE 2 cont'd.

LOCATION	NAME OF FACILITY	PROJECT	RATED BED CAPACITY Prior to Construction ACT	AUX	NH	Upon Completion ACT	AUX	NH	STATUS OF CONSTRUCTION
VALLEYVIEW	Valleyview Health Centre	Replacement and Addition	37	—	—	37	8	17	Planning
VEGREVILLE	Vegreville Auxiliary Hospital and Nursing Home	Renovations and Addition							Planning
VEGREVILLE	St. Joseph's General Hospital	Renovations, expansion and upgrade	74	—	—	74	—	—	Planning
VERMILION	Vermilion Health Care Complex	Addition	41	15	50	41	25	50	Planning
WABASCA	Wabasca – Desmarais General Hospital	New facility and staff residence	—	—	—	15	—	—	Design
WESTLOCK	Immaculata Hospital	Replacement	83	—	—	65	—	—	Planning
WETASKIWIN	Wetaskiwin General Hospital	Replacement and Renovations	140	50	50	140	50	80	Design
	Alberta Heritage Savings Trust Fund								
EDMONTON	Walter C. Mackenzie Health Sciences Centre	Replacement	1038	40	—	843	—	—	Construction

The Alberta Nursing Home Plan

DESCRIPTION

The Alberta Nursing Home Plan operates under the authority of the Nursing Homes Act. The Act provides for the establishment and incorporation of nursing home districts and gives the Minister of Hospitals and Medical Care the authority to enter into contracts with district boards or proprietary agencies to provide nursing home care under the provisions of the Act.

BENEFITS

Nursing homes provide supervised, personal care for people who are not ill enough to require hospitalization in a general or auxiliary hospital but who require assistance in coping with daily living. There are three kinds of nursing home ownerships in Alberta – private, voluntary and district. Under the Alberta Nursing Home Plan, eligible residents receive per diem benefits in those homes which are under contract with the Minister of Hospitals and Medical Care to provide care under the terms and provisions of the Nursing Homes Act. As well, each patient is required to pay a daily rate set out in the regulations governing contract nursing homes. The daily rates that nursing home operators can charge directly to eligible patients stood at $14.00 for standard, $16.50 for semi-private and $20.25 for private accommodation as of March 31, 1987.

At the end of the reporting year there was a total capacity of 7,868 beds in 88 nursing homes, averaging 39.5 beds per 1,000 population 65 years of age and older.

A complete listing of nursing homes by location, ownership and approved bed complement follows.

A distribution of total expenditure by nursing home is found in the Financial Information section of the Annual Report.

NURSING HOME PLAN SUMMARY OF ACTIVITIES

Patient Classification Tool

In response to a recommendation made in the Nursing Home Review Panel Report and the recommendations made by the Nursing Home Liaison Committee, the Minister of Hospitals and Medical Care approved the development of a patient classification tool to assist in estimating care requirements of patients in nursing homes and auxiliary hospitals.

Information from the tool will be used as one variable for the development of funding mechanisms for distribution of existing funds to nursing homes and auxiliary hospitals in a manner which will be sensitive to variations in case mix.

Development of the Patient Classification Tool is divided into three phases. Phase I involves the conceptualization and development of a tool which will group nursing home and auxiliary hospital patients into categories reflecting variations in resource requirements. This phase was completed in 1986. Phase II involves an evaluation of the tool and Phase III will focus on the plans for implementing the tool.

Assessment and Placement Model

One of the other major recommendations of the Nursing Home Review Panel was the development of a single entry model into the long-term care system. As a result of the recommendation, the three provincial government departments involved in long-term care – Social Services, Housing, and Hospitals and Medical Care along with Alberta Mortgage and Housing Corporation – developed a single entry assessment and placement model.

The model calls for initial assessment of individuals to be made through the Coordinated Home Care Program. People who are identified as requiring long-term institutional care will then be referred to an institutional care coordinator. Assessment and placement services in each region are the responsibility of the Regional Assessment and Placement Committee.

The model is being pilot-tested in a rural and in an urban location within Alberta. The rural location selected is the Foothills Health Unit area, which includes the municipal districts of Foothills, Black Diamond, Vulcan, Carmangay, High River, County of Vulcan, the northerly part of Willow Creek and all towns and villages within these boundaries. The Calgary area has been chosen as the urban pilot site. The two pilot projects will be used to evaluate the model and the experience gained will provide a basis for recommending a province-wide system.

Nursing Homes Patient Per Diem Claims Method Replaced

Effective January 1, 1987 the nursing home patient per diem claims method of payment was replaced with recurring payment based on estimated occupancies and activities and utilizing direct deposits rather than cheques. These payments are adjusted quarterly based on quarterly nursing home report submissions. This change reduced administrative requirements in both nursing homes and the Department.

TABLE 3

NURSING HOMES BY LOCATION, OWNERSHIP AND APPROVED BED COMPLEMENT as at March 31, 1987

Location/Name	Ownership	Approved Bed Complement[1]
*Athabasca, Extendicare (Alberta) Ltd.	Private	50
Barrhead	District	75
*Bonnyville, Extendicare (Alberta) Ltd.	Private	50
*Brooks Health Centre	District	50
*Calgary, Bethany Care Centre	Religious	75
Calgary, Beverly	Private	182
Calgary, Bow-Crest	Private	150
Calgary, Bow View	Private	154
Calgary, Brentwood	Private	120
*Calgary, Cedars Villa	Private	248
*Calgary, Central Park Lodge	Private	123
Calgary, Chinook	Private	149
Calgary, Father Lacombe	Religious	100
*Calgary, Forest Grove Care Centre	Private	225
*Calgary, George Boyack	District	222
Calgary, Glamorgan	Private	55
Calgary, Mayfair	Private	142
*Calgary, Extendicare (Alberta) Ltd.	Private	96
*Calgary, Sarcee	District	75
Calgary, Scottish	Private	46
Calgary, Southwood	Private	120
*Camrose, Bethany	Religious	100
Cardston, Grandview	District	40
*Coronation, Coronation-Paintearth	District	33
*Crowsnest Pass	District	66
*Didsbury, Mountain View Health Care Centre (Nursing Home)	District	40
*Drayton Valley and District Health Complex (Nursing Home)	District	20
*Drumheller, Regional Health Complex (Nursing Home)	District	80
*Edmonton, Central Park Lodge	Private	134
*Edmonton, Dickinsfield Extended Care Centre	District	100
*Edmonton, Dr. Angus McGugan Pavilion	District	225
*Edmonton, Extendicare (Alberta) Ltd. (North)	Private	120
Edmonton, Extendicare (Alberta) Ltd. (South)	Private	95
*Edmonton, Good Samaritan Mount Pleasant Care Centre	Religious	196
*Edmonton, Good Samaritan (Southgate)	Religious	225
Edmonton, Hardisty	Private	226
*Edmonton, Jasper Place Central Park Lodge	Private	100
Edmonton, Jubilee Lodge	Private	128
*Edmonton, Lynnwood Extended Care Centre Roger Parker Pavilion	District	147
Edmonton, Millwoods Shepherd's Care Centre	Religious	75
*Edmonton, St. Michael's Extended Care Centre	Lay Corp.	75
*Edmonton, Venta	Private	65
*Edson	District	50
Fairview	District	40
*Fort Macleod, Extendicare (Alberta) Ltd.	Private	50

TABLE 3 cont'd.

Location/Name	Ownership	Approved Bed Complement[1]
Fort Saskatchewan, Rivercrest Lodge	Private	70
Grande Prairie, Central Park Lodge	Private	88
*Grande Prairie, Queen Elizabeth II (Nursing Home)	District	50
*Hanna, Palliser	District	50
*High Prairie, J.B. Wood	District	52
*High River	District	50
*Hythe	District	25
*Lacombe	District	50
*Lamont	District	31
*Leduc, Extendicare (Alberta) Ltd.	Private	79
*Leduc, Salem Manor	Religious	100
Lethbridge, Edith Cavell	Private	100
*Lethbridge, Extendicare (Alberta) Ltd.	Private	120
*Lethbridge, Southland	District	150
Linden	Religious	37
Lloydminster, Dr. Cooke	District	75
McLennan, Our Lady of the Lake	District	50
*Mayerthorpe, Extendicare (Alberta) Ltd.	Private	50
Medicine Hat, Central Park Lodge	Private	130
Medicine Hat, Sunnyside	Religious	100
*Olds	District	25
*Peace River, Sutherland	District	76
Ponoka, Northcott Lodge	Private	70
Provost Municipal Health Care Centre	District	50
*Red Deer	District	118
*Red Deer, Valley Park Manor	District	100
*Red Deer, West Park	District	70
*St. Albert, Youville	Religious	162
*St. Paul, Extendicare (Alberta) Ltd.	Private	75
*Sherwood Park	Religious	100
Smoky Lake	District	33
*Stettler	District	50
*Stony Plain, Good Samaritan Care Centre	Religious	90
Strathmore, Valley General and Extended Care Centre (Nursing Home)	District	23
*Taber and District Health Care Complex (Nursing Home)	District	50
*Trochu Health Care Centre (Nursing Home)	Religious	25
*Two Hills, Health Care Centre (Nursing Home)	District	40
*Vegreville	District	40
*Vermilion Health Care Complex	District	75
*Viking, Extendicare (Alberta) Ltd.	Private	64
*Vulcan, Extendicare (Alberta) Ltd.	Private	36
Westlock	District	52
*Wetaskiwin	District	50
Total 88 Nursing Homes		7,868

NOTES:

* Indicates that the nursing home is accredited by the Canadian Council on Hospital Accreditation.

(1) Number of beds that the nursing home was approved to accommodate at March 31, 1987.

LIST OF FINANCIAL INFORMATION

SCHEDULE		PAGE
A.	DISTRIBUTION OF TOTAL EXPENDITURE FOR INSTITUTIONAL CARE BY TYPE OF EXPENDITURE	37
B.	DISTRIBUTION OF TOTAL EXPENDITURE BY ACTIVE CARE FACILITY	38
C.	DISTRIBUTION OF TOTAL EXPENDITURE BY AUXILIARY HOSPITAL	43
D.	DISTRIBUTION OF TOTAL EXPENDITURE BY NURSING HOME	45
E.	DISTRIBUTION OF TOTAL EXPENDITURE BY OTHER FACILITIES	48

GENERAL REVENUE FUND

Statement of Expenditure	49
Statement of Revenue	50

CAPITAL FUND

Preface	51
How the Capital Fund Works	51
Statement of Expenditure	52
Program: Authority, Objective and Delivery Mechanism	53

ALBERTA HERITAGE SAVINGS TRUST FUND

Project Description	54
Statement of Amounts Expended	54

HEALTH CARE INSURANCE FUND FINANCIAL STATEMENTS

Auditor's Report	56
Balance Sheet	57
Statement of Revenue and Expenditure	58
Statement of Changes in Financial Position	59
Notes to the Financial Statements	60

SCHEDULE A

DISTRIBUTION OF TOTAL EXPENDITURES FOR INSTITUTIONAL CARE BY TYPE OF EXPENDITURE for the year ended March 31, 1987

Expenditure	Institution				Other Support	Total
	Active Care Hospitals	Auxiliary Hospitals	Other Facilities	Nursing Homes		
General Revenue Fund						
Operating Support	$1,322,351,824	$182,253,563	$1,871,314	$ —	$ —	$1,506,476,701
Per Diem Support	—	—	—	112,331,594	—	112,331,594
Air Ambulance	—	—	—	—	5,387,096	5,387,096
Blood Service	—	—	—	—	13,010,998	13,010,998
Other Program Support	64,489,365	3,313,468	—	11,842,644	341,984	79,987,461
Extraordinary Maintenance	2,830,887	514,923	—	233,965	—	3,579,775
Major Equipment Grants	28,492,840	882,450	—	1,100,810	—	30,476,100
	1,418,164,916	186,964,404	1,871,314	125,509,013	18,740,078	1,751,249,725*
Capital Fund						
Major Capital Construction	214,625,317	10,707,854	—	63,740	—	225,396,911
Capital Upgrading Grants	9,994,263	2,137,963	—	131,027	—	12,263,253
	224,619,580	12,845,817	—	194,767	—	237,660,164
Heritage Savings Trust Fund						
Cancer Research	4,805,568	—	—	—	—	4,805,568
Capital Projects	32,012,707	—	—	—	—	32,012,707
	36,818,275	—	—	—	—	36,818,275
Total Expenditures	$1,679,602,771	$199,810,221	$1,871,314	$125,703,780	$18,740,078	$2,025,728,164

* Excludes capital projects debt repayment expenditures of $10,368,592.

SCHEDULE B

DISTRIBUTION OF TOTAL EXPENDITURE BY ACTIVE CARE FACILITY
for the year ended March 31, 1987

Institution	Operating Support	Other Program Support	Extra-Ordinary Maintenance	Major Equipment Grants	Capital Fund		A.H.S.T.F.		Total
					Major Construction	Capital Upgrading	Cancer Research	Capital Projects	
ATHABASCA, Athabasca Municipal	$ 3,156,227	$ —	$ —	$ 60,513	$ —	$ —	$ —	$ —	$ 3,216,740
BANFF, Mineral Springs	2,543,880	33,901	—	13,073	11,410,304	—	—	—	14,001,158
BARRHEAD, Barrhead General	4,306,802	7,065	—	32,482	—	60,763	—	—	4,407,112
BASHAW, Bashaw General	1,428,954	—	—	16,184	30,173	25,340	—	—	1,500,651
BASSANO, Bassano General	1,362,626	—	57,254	62,211	—	11,197	—	—	1,493,288
BEAVERLODGE, Beaverlodge Municipal	1,632,956	—	—	47,937	—	40,229	—	—	1,721,122
BENTLEY, Bentley General	844,407	—	—	1,246	—	—	—	—	845,653
BLACK DIAMOND, Oilfields General	2,233,602	—	10,784	1,264	63,957	—	—	—	2,309,607
BLAIRMORE, Crowsnest Pass General	3,263,316	368,892	—	15,695	8,750,000	—	—	—	12,397,903
BONNYVILLE, Health Centre	4,225,365	157,232	—	8,630	147,142	—	—	—	4,538,369
BONNYVILLE, St. Louis	500,356	23,149	—	—	—	—	—	—	523,505
BOW ISLAND, Bow Island General	1,356,605	—	7,919	52,660	—	—	—	—	1,417,184
BOYLE, Boyle General	1,292,042	4,952	—	25,448	—	14,432	—	—	1,336,874
BRETON, Breton General	1,545,025	—	—	52,295	—	23,524	—	—	1,620,844
BROOKS, Brooks Health Centre	5,061,143	46,222	—	99,491	—	47,837	—	—	5,254,693
CALGARY, Alberta Children's Provincial General	39,197,749	1,883,425	—	1,617,090	—	—	—	—	42,698,264
CALGARY, Calgary General	98,083,805	719,135	—	1,542,235	106,803	459,579	—	—	100,911,557
CALGARY, Colonel Belcher	14,203,444	—	—	568,532	—	—	—	—	14,771,976
CALGARY, Foothills Provincial General	113,362,298	11,394,545	—	2,480,462	7,700,000	913,848	—	—	135,851,153
CALGARY, Holy Cross	64,051,643	810,473	—	1,656,288	47,000	18,216	—	—	66,583,620
CALGARY, Peter Lougheed General	—	7,899,244	—	—	30,429,028	—	—	—	38,328,272
CALGARY, Rockyview General	26,306,634	1,316,388	—	76,630	19,845,000	116,139	—	—	47,660,791
CALGARY, Salvation Army Grace	9,757,182	85,419	—	93,208	—	—	—	—	9,935,809
CAMROSE, St. Mary's	7,004,032	38,050	—	302,446	636,525	—	—	—	7,981,053
CANMORE, Canmore Municipal	2,563,930	—	—	12,360	—	—	—	—	2,576,290
CARDSTON, Cardston Municipal	4,185,057	—	—	59,129	—	596,415	—	—	4,840,601
CASTOR, Our Lady of the Rosary	1,509,454	14,167	—	38,624	—	26,414	—	—	1,588,659
CEREAL, Cereal Municipal	500,134	—	33,223	34,549	—	9,513	—	—	577,419
CLARESHOLM, Claresholm General	2,242,048	—	—	49,478	—	5,162	—	—	2,296,688

SCHEDULE B cont'd.

Institution	Operating Support	Other Program Support	Extra-Ordinary Maintenance	Major Equipment Grants	Capital Fund		A.H.S.T.F.		Total
					Major Construction	Capital Upgrading	Cancer Research	Capital Projects	
COALDALE, Coaldale Community	1,519,624	13,129	—	43,540	28,625	16,132	—	—	1,621,050
COLD LAKE, John Neil	2,831,518	531,725	—	12,631	5,284,896	—	—	—	8,660,770
CONSORT, Consort Municipal	1,441,356	—	14,749	—	—	—	—	—	1,456,105
CORONATION, Coronation Municipal	1,619,736	—	—	—	—	—	—	—	1,619,736
DAYSLAND, Dayland General	2,096,460	—	18,000	71,251	24,331	10,671	—	—	2,220,713
DESMARAIS, St. Martin's Health Centre	495,268	—	—	1,810	—	—	—	—	497,078
DEVON, Devon Civic	2,258,338	—	96,072	—	—	—	—	—	2,354,410
DIDSBURY, Mountain View Health Care Centre	2,764,497	—	—	—	—	—	—	—	2,764,497
DRAYTON VALLEY, Drayton Valley General	4,185,310	2,982	14,741	11,832	—	—	—	—	4,214,865
DRUMHELLER, Drumheller Regional Health Complex	4,626,530	2,902	—	113,488	12,500	—	—	—	4,755,420
ECKVILLE, Eckville Municipal	1,484,833	—	—	6,087	19,914	—	—	—	1,510,834
EDMONTON, Alberta Hospital	45,115,145	1,025,019	369,441	416,796	366,924	1,021,495	—	—	48,314,820
EDMONTON, Northern Alberta Children's	304,573	—	—	94,917	319,545	—	—	—	719,035
EDMONTON, Charles Camsell	29,114,756	269,469	59,225	750,859	21,934	226,441	—	—	30,442,684
EDMONTON, Edmonton General	51,590,006	935,303	12,761	950,841	109,858	—	—	—	53,598,769
EDMONTON, Glenrose Provincial General	26,770,733	246,114	—	294,338	3,150,215	—	—	—	30,461,400
EDMONTON, Grey Nuns	—	6,343,521	—	—	31,616,426	—	—	—	37,959,947
EDMONTON, Misericordia	50,111,931	936,887	92,350	1,541,070	12,626	55,294	—	—	52,750,158
EDMONTON, Royal Alexandra	108,125,912	1,230,435	697,777	2,435,883	287,463	1,355,575	—	—	114,133,045
EDMONTON, University of Alberta	164,459,485	19,984,415	87,297	3,150,440	108,327	141,718	—	32,012,707	219,944,389
EDSON, St. John's	2,654,660	20,490	—	63,950	—	24,580	—	—	2,763,680
ELK POINT, Elk Point Municipal	2,632,195	—	—	52,688	27,693	13,370	—	—	2,725,946
ELNORA, Elnora General	779,185	—	15,630	1,569	—	—	—	—	796,384
EMPRESS, Empress Municipal	683,863	—	—	—	—	—	—	—	683,863
FAIRVIEW, Fairview General	3,270,584	—	—	29,648	27,696	63,315	—	—	3,391,243
FORT MACLEOD, Macleod Municipal	2,502,349	—	—	—	—	—	—	—	2,502,349
FORT MCMURRAY, Fort McMurray Regional	17,419,661	—	—	299,293	—	—	—	—	17,718,954
FORT SASKATCHEWAN, Fort Saskatchewan	3,284,433	—	132,898	73,762	—	18,340	—	—	3,509,433
FORT VERMILION, St. Theresa General	2,366,289	—	—	1,650	—	—	—	—	2,367,939
FOX CREEK, Fox Creek	789,106	—	—	—	—	—	—	—	789,106

SCHEDULE B cont'd.

Institution	Operating Support	Other Program Support	Extra-Ordinary Maintenance	Major Equipment Grants	Capital Fund		A.H.S.T.F.		Total
					Major Construction	Capital Upgrading	Cancer Research	Capital Projects	
GALAHAD, Galahad General	1,398,614	—	127,518	24,657	—	485,721	—	—	2,036,510
GLENDON, Glendon Municipal	946,553	—	—	—	—	—	—	—	946,553
GRANDE CACHE, Grande Cache General	1,198,189	—	—	30,173	—	4,924	—	—	1,233,286
GRANDE PRAIRIE, Queen Elizabeth II	26,875,127	—	—	1,372,194	700,000	38,500	—	—	28,985,821
GRIMSHAW, Grimshaw/Berwyn & District	1,984,558	—	—	—	—	—	—	—	1,984,558
HANNA, Hanna General	2,658,481	—	15,000	52,482	—	42,137	—	—	2,768,100
HARDISTY, Hardisty General	1,573,974	—	—	—	—	—	—	—	1,573,974
HIGH LEVEL, High Level Community Health Centre	2,079,516	—	—	49,696	—	—	—	—	2,129,212
HIGH PRAIRIE, High Prairie Regional Health Complex	4,997,603	—	—	239,999	—	380,350	—	—	5,617,952
HIGH RIVER, High River General	5,892,318	—	—	23,054	—	202,000	—	—	6,117,372
HINTON, Hinton General	3,229,548	1,200	2,500	78,381	—	—	—	—	3,311,629
HYTHE, Hythe Municipal	962,383	29,626	—	25,390	—	—	—	—	1,017,399
INNISFAIL, Innisfail Health Care Centre	2,832,655	—	—	—	133,526	—	—	—	2,966,181
ISLAY, Islay Municipal	735,125	—	—	15,718	—	7,809	—	—	758,652
JASPER, Seton General	1,488,871	2,982	—	53,323	—	22,789	—	—	1,567,965
KILLAM, Killam General	1,598,805	7,475	69,783	33,589	—	126,371	—	—	1,836,023
LAC LA BICHE, Lac La Biche General	5,068,719	—	—	24,248	—	—	—	—	5,092,967
LACOMBE, Lacombe General	3,229,786	—	—	13,965	18,022	—	—	—	3,261,773
LAMONT, Archer Memorial	2,574,942	45,795	237,443	39,974	—	—	—	—	2,898,154
LEDUC, Leduc General	2,486,142	1,299,189	—	8,825	10,419,916	—	—	—	14,214,072
LETHBRIDGE, Lethbridge Regional (General Centre)	16,667,803	464,088	—	345,672	38,306,778	—	—	—	55,784,341
LETHBRIDGE, Lethbridge Regional Lab.	4,490,136	—	—	57,445	—	—	—	—	4,547,581
LETHBRIDGE, St. Michael's General	15,633,347	—	92,595	447,994	—	838,971	—	—	17,012,907
LLOYDMINSTER, Lloydminster*	3,017,304	—	—	25,225	6,100,000	—	—	—	9,142,529
MAGRATH, Magrath Municipal	1,785,447	—	5,000	—	—	—	—	—	1,790,447
MANNING, Manning Municipal	1,771,430	—	—	10,947	46,326	—	—	—	1,828,703
MANNVILLE, Mannville Municipal	1,676,392	—	37,449	8,793	—	49,075	—	—	1,771,709
MAYERTHORPE, Mayerthorpe General	1,770,306	—	—	—	—	—	—	—	1,770,306
MCLENNAN, Sacred Heart	3,836,389	71,065	—	39,223	11,384,200	—	—	—	15,330,877

SCHEDULE B cont'd.

Institution	Operating Support	Other Program Support	Extra-Ordinary Maintenance	Major Equipment Grants	Capital Fund		A.H.S.T.F.		Total
					Major Construction	Capital Upgrading	Cancer Research	Capital Projects	
MEDICINE HAT, Medicine Hat and District (General Centre)	22,640,123	—	—	—	3,700,000	—	—	—	26,340,123
MILK RIVER, Border Counties General	1,123,235	—	5,500	128,524	—	74,278	—	—	1,331,537
MUNDARE, Mary Immaculate	808,844	11,242	—	25,103	—	—	—	—	845,189
MYRNAM, Myrnam Municipal	1,013,962	—	32,270	153,735	—	89,792	—	—	1,289,759
OLDS, Olds Municipal	2,761,307	163,120	—	—	3,141,529	—	—	—	6,065,956
OYEN, Big Country	1,239,531	—	—	8,833	—	174,318	—	—	1,422,682
PEACE RIVER, Peace River Municipal	4,854,146	—	11,810	62,579	—	—	—	—	4,928,535
PICTURE BUTTE, Picture Butte Municipal	1,176,548	—	8,500	27,996	—	7,636	—	—	1,220,680
PINCHER CREEK, Pincher Creek Municipal	3,554,526	—	—	—	—	—	—	—	3,554,526
PONOKA, Alberta Hospital	28,775,620	12,272	159,621	863,346	4,740,484	287,607	—	—	34,838,950
PONOKA, Ponoka General	3,358,289	118,895	—	14,223	2,780,568	—	—	—	6,271,975
PROVOST, Provost Municipal Health Care Centre	2,235,001	—	—	45,957	—	18,360	—	—	2,299,318
RAYMOND, Raymond Municipal	1,858,226	—	—	16,985	—	—	—	—	1,875,211
RED DEER, Red Deer General	39,054,098	15,265	—	1,010,189	—	218,033	—	—	40,297,585
RED DEER, Red Deer Regional Lab	5,103,012	—	—	73,876	—	—	—	—	5,176,888
REDWATER, Redwater General	1,976,286	—	—	18,125	—	378,657	—	—	2,373,068
RIMBEY, Rimbey General	1,493,902	—	—	11,860	10,000	786,855	—	—	2,302,617
ROCKY MOUNTAIN HOUSE, Rocky Mountain House General	2,688,967	2,976	11,242	89,847	—	26,952	—	—	2,819,984
SLAVE LAKE, Slave Lake General	2,236,362	—	6,498	86,846	9,993	—	—	—	2,339,699
SMOKY LAKE, George McDougall Memorial	1,749,220	—	—	—	—	—	—	—	1,749,220
SPIRIT RIVER, Central Peace General	2,190,352	—	—	24,942	33,171	—	—	—	2,248,465
STETTLER, Stettler General	3,543,118	236,103	32,833	75,834	5,556,779	—	—	—	9,444,667
STONY PLAIN, Stony Plain Municipal	3,036,615	—	89,725	219,663	—	—	—	—	3,346,003
STRATHMORE, Valley General Hospital	2,306,984	—	—	—	—	95,254	—	—	2,402,238
ST. ALBERT, Sturgeon General	9,267,322	—	—	102,818	221,532	—	—	—	9,591,672
ST. PAUL, St. Therese General	4,059,386	507,284	—	49,488	3,344,685	—	—	—	7,960,843
SUNDRE, Sundre General	1,543,545	—	96,466	46,145	—	—	—	—	1,686,156
SWAN HILLS, Swan Hills General	1,412,546	—	—	—	—	—	—	—	1,412,546
TABER, Taber General	4,038,318	—	—	—	—	—	—	—	4,038,318
THREE HILLS, Three Hills Municipal	1,679,072	—	18,460	668	—	—	—	—	1,698,200

Institution	Operating Support	Other Program Support	Extra-Ordinary Maintenance	Major Equipment Grants	Capital Fund		A.H.S.T.F.		Total
					Major Construction	Capital Upgrading	Cancer Research	Capital Projects	
TOFIELD, Tofield Municipal	2,084,237	62,161	—	7,480	2,513,127	—	—	—	4,667,005
TROCHU, St. Mary's	1,390,335	14,706	—	54,961	—	20,900	—	—	1,480,902
TWO HILLS, Two Hills Municipal	2,636,834	—	—	—	—	—	—	—	2,636,834
VALLEYVIEW, Valleyview Health Centre	2,509,714	—	—	64,046	29,751	18,763	—	—	2,622,274
VEGREVILLE, St. Joseph's General	4,240,784	35,110	—	130,034	132,087	—	—	—	4,538,015
VERMILION, Vermilion Health Care Complex	3,673,379	6,836	—	57,033	14,700	—	—	—	3,751,948
VIKING, Viking General	2,436,712	—	—	16,875	—	—	—	—	2,453,587
VILNA, Our Lady's	1,332,262	—	—	—	—	—	—	—	1,332,262
VULCAN, Vulcan General	1,797,768	—	—	13,205	—	—	—	—	1,810,973
WABASCA, Wabasca - Desmarais Community	—	—	—	—	3,544	—	—	—	3,544
WAINWRIGHT, Wainwright & Dist. Health Care Complex	2,901,908	3,700	—	313,095	—	—	—	—	3,218,703
WESTLOCK, Immaculata	4,029,430	37,212	—	49,902	44,155	183,784	—	—	4,344,483
WETASKIWIN, Wetaskiwin General	9,932,694	279,186	24,671	178,176	447,071	3,767	—	—	10,865,565
WHITECOURT, Whitecourt General	2,046,300	—	—	61,523	—	21,321	—	—	2,129,144
WILLINGDON, Mary Immaculate	1,170,800	8,152	—	32,986	—	24,215	—	—	1,236,153
Metro-Edmonton Hospital District #106	395,688	—	—	—	—	—	—	—	395,688
Alberta Cancer Board**	37,515,001	4,709,075	25,882	1,896,472	208,468	49,585	4,805,568	—	49,210,051
TOTAL	$1,322,351,824	$64,489,365	$2,830,887	$28,492,840	$214,625,317	$9,994,263	$4,805,568	$32,012,707	$1,679,602,771

* Expenditure to an out-of-province hospital for Alberta residents utilizing the facility.

** Includes funding for: Tom Baker Cancer Centre, Calgary; Cross Cancer Institute, Edmonton; Lethbridge Cancer Clinic and peripheral cancer clinics in Grande Prairie, Medicine Hat, Peace River, and Red Deer.

SCHEDULE C

DISTRIBUTION OF TOTAL EXPENDITURE BY AUXILIARY HOSPITAL
for the year ended March 31, 1987

Institution	Operating Support	Other Program Support	Extra-Ordinary Maintenance	Major Equipment Grants	Capital Fund		Total
					Major Construction	Capital Upgrading	
ATHABASCA, Athabasca	$ 877,329	$ —	$ —	$ —	$ —	$ —	$ 877,329
BARRHEAD, Dr. W.R. Keir Care Centre	1,110,671	—	—	—	—	—	1,110,671
BLAIRMORE, Crowsnest Pass General	—	81,202	—	—	—	—	81,202
BLACK DIAMOND, Oilfields Auxiliary	875,619	—	—	—	—	—	875,619
BONNYVILLE, Bonnyville Health Centre (Auxiliary Centre)	940,053	—	—	—	—	—	940,053
BOW ISLAND, Bow Island	694,132	—	—	2,100	—	—	696,232
BROOKS, Brooks	897,075	—	—	3,775	—	—	900,850
CALGARY, Bethany	13,932,109	801,273	188,614	95,232	—	14,453	15,031,681
CALGARY, Colonel Belcher	5,505,194	—	—	15,435	—	—	5,520,629
CALGARY, A.H. & N.H. District #7*	14,950,561	4,808	155,500	73,657	—	146,202	15,330,728
CALGARY, Dr. Vernon Fanning Extended Care	11,125,095	362,322	—	100,595	—	1,537,445	13,125,457
CALGARY, Foothills	6,838,219	—	—	29,305	—	—	6,867,524
CAMROSE, Bethany	1,472,151	11,432	—	18,140	12,638	—	1,514,361
CANMORE, Canmore	856,478	—	—	—	—	—	856,478
CARMANGAY, Little Bow	572,536	—	—	23,559	—	44,269	640,364
CARDSTON, Cardston	1,015,442	—	—	3,570	—	—	1,019,012
CLARESHOLM, Willow Creek-Claresholm	1,586,270	—	1,877	17,472	1,553,090	—	3,158,709
CORONATION, Coronation Paintearth	828,226	—	—	3,912	—	—	832,138
DIDSBURY, Mountain View Health Care Centre	1,653,360	—	15,100	16,302	—	—	1,684,762
DRAYTON VALLEY, Drayton Valley	1,082,817	—	—	—	—	—	1,082,817
DRUMHELLER, Regional Health Complex	993,258	—	—	3,150	—	—	996,408
EDMONTON, Allen Gray	1,665,592	7,632	7,747	42,263	—	16,092	1,739,326
EDMONTON, Dickinsfield Extended Care Centre	7,961,358	157,548	—	21,000	—	—	8,139,906
EDMONTON, Good Samaritan	6,042,987	325,523	—	20,999	9,027,840	—	15,417,349
EDMONTON, Mewburn Veterans Centre	3,918,617	—	—	15,750	—	—	3,934,367
EDMONTON, Millwoods Shepherd's Care Centre	2,387,109	—	—	—	13,415	—	2,400,524
EDMONTON & RURAL A.H. & N.H. District #24**	18,931,676	134,806	38,773	127,045	—	111,342	19,343,642
EDMONTON, St. Joseph's	6,129,670	51,756	17,812	34,790	—	95,856	6,329,884
EDMONTON, St. Michael's	2,411,253	—	—	—	10,406	—	2,421,659
EDMONTON, University of Alberta, (Aberhart Centre)	1,806,560	—	—	4,200	—	—	1,810,760

SCHEDULE C cont'd.

Institution	Operating Support	Other Program Support	Extra-Ordinary Maintenance	Major Equipment Grants	Capital Fund		Total
					Major Construction	Capital Upgrading	
EDMONTON, Youville Geriatric Services	15,639,568	—	—	20,370	—	—	15,659,938
GRANDE PRAIRIE, Queen Elizabeth II	3,578,037	761,855	—	2,053	—	—	4,341,945
HIGH RIVER, High River	1,151,179	11,460	—	—	—	—	1,162,639
INNISFAIL, Innisfail Health Care Centre (Aux.)	1,354,209	—	—	—	—	—	1,354,209
ISLAY, Islay	669,970	—	—	2,095	—	—	672,065
KILLAM, Flagstaff	1,568,787	—	—	5,250	—	1,720	1,575,757
LAC LA BICHE, Lac La Biche	998,231	—	—	—	—	—	998,231
LACOMBE, Lacombe	941,306	—	—	—	—	—	941,306
LAMONT, Archer Memorial	529,266	—	—	2,520	—	11,737	543,523
LAMONT, Lamont	1,614,910	—	86,997	26,645	37,852	7,142	1,773,546
LETHBRIDGE, Lethbridge Regional (Rehab. Centre)	3,621,281	—	—	18,840	—	—	3,640,121
LLOYDMINSTER, Lloydminster	1,204,012	—	—	5,250	52,063	5,724	1,267,049
MEDICINE HAT, Medicine Hat & District	4,538,083	—	—	10,846	—	—	4,548,929
MUNDARE, Mundare	642,747	—	—	2,100	—	1,720	646,567
OLDS, Olds General (Auxiliary)	512,532	132,000	—	—	—	—	644,532
OYEN, Big Country (Auxiliary)	1,064,398	—	—	—	—	—	1,064,398
PEACE RIVER, Peace River - Fairview	1,561,021	—	—	5,250	—	—	1,566,271
PINCHER CREEK, Pincher Creek	732,146	—	—	3,665	—	—	735,811
RADWAY, Radway Health Care Centre	973,202	—	2,503	2,100	—	15,622	993,427
RED DEER, Dr. Richard Parsons	3,936,675	—	—	10,500	—	8,094	3,955,269
RIMBEY, Rimbey	1,595,181	—	—	—	—	—	1,595,181
ROCKY MOUNTAIN HOUSE, Rocky Mountain House	1,026,210	—	—	37,841	—	1,085	1,065,136
SMOKY LAKE, George McDougall Memorial (Auxiliary)	789,127	—	—	—	—	—	789,127
STETTLER, Dr. A.E. Kennedy	1,751,714	226,963	—	5,250	—	—	1,983,927
ST. PAUL, St. Therese General	—	242,888	—	—	—	—	242,888
TABER, Taber and District Health Care Complex	793,991	—	—	12,359	—	—	806,350
THREE HILLS, Three Hills Health Care Centre (Aux. Centre)	893,608	—	—	—	—	18,503	912,111
TWO HILLS, Two Hills Health Care Centre (Auxiliary)	729,661	—	—	—	—	—	729,661
VEGREVILLE, Vegreville	1,544,291	—	—	10,719	—	13,220	1,568,230
WAINWRIGHT, Wainwright and District Health Care Complex	2,436,315	—	—	—	—	—	2,436,315
WESTLOCK, Thorhild-Westlock	2,051,560	—	—	13,381	550	64,200	2,129,691
WETASKIWIN, Wetaskiwin	1,693,368	—	—	9,490	—	—	1,702,858
WHITELAW, Hotel Dieu Of St. Joseph	1,055,560	—	—	3,675	—	23,537	1,082,772
Total	$182,253,563	$3,313,468	$514,923	$882,450	$10,707,854	$2,137,963	$199,810,221

* CALGARY, A.H. & N.H. District #7 includes:
- Cross Bow
- Glenmore Park
- Sarcee

** EDMONTON & RURAL, A.H. & N.H. District #24 includes:
- Grandview Extended Care Centre
- Lynnwood Extended Care Centre
- Norwood Extended Care Centre

SCHEDULE D

DISTRIBUTION OF TOTAL EXPENDITURE BY NURSING HOME
for the year ended March 31, 1987

Nursing Home	Per Diem Support	Other Program Support	Extraordinary Maintenance	Major Equipment Grants	Capital Fund		Total
					Major Construction	Capital Upgrading	
ATHABASCA, Extendicare	$ 753,078	$ 96,813	$ —	$ 5,295	$ —	$ —	$ 855,186
BARRHEAD, Barrhead	1,103,097	146,854	—	—	—	—	1,249,951
BLAIRMORE, Crowsnest Pass	928,082	181,011	—	—	—	—	1,109,093
BONNYVILLE, Extendicare	716,592	104,455	—	4,611	—	—	825,658
BROOKS, Health Centre	719,399	94,690	89,940	19,633	—	29,919	953,581
CALGARY, Bethany Care Centre	1,095,555	152,158	—	8,845	—	—	1,256,558
CALGARY, Beverly	2,555,632	206,849	—	7,813	—	—	2,770,294
CALGARY, Bow-Crest	2,118,633	202,038	—	4,380	—	—	2,325,051
CALGARY, Bow View	2,177,168	179,526	—	—	—	—	2,356,694
CALGARY, Brentwood	1,683,133	149,408	—	18,000	—	—	1,850,541
CALGARY, Cedars Villa	3,460,866	234,129	—	21,488	—	—	3,716,483
CALGARY, Central Park Lodge	1,725,776	128,501	—	4,855	—	—	1,859,132
CALGARY, Chinook	1,935,868	144,381	—	20,222	—	—	2,100,471
CALGARY, Extendicare	1,302,394	108,651	—	13,122	—	—	1,424,167
CALGARY, Forest Grove Care Centre	3,162,406	217,209	—	20,300	—	—	3,399,915
CALGARY, George Boyack	3,182,937	522,063	—	41,356	—	96,691	3,843,047
CALGARY, Glamorgan	774,907	110,670	—	—	—	—	885,577
CALGARY, Mayfair	1,995,769	171,093	—	—	—	—	2,166,862
CALGARY, Sarcee	1,092,013	151,484	—	30,993	—	1,417	1,275,907
CALGARY, Scottish	682,206	85,028	—	6,202	—	—	773,436
CALGARY, Southwood	1,692,246	133,818	—	13,955	—	—	1,840,019
CAMROSE, Bethany	1,455,210	116,191	—	12,391	—	—	1,583,792
CARDSTON, Grandview	608,210	75,088	2,481	1,933	—	—	687,712
CORONATION, Coronation-Paintearth	502,815	74,218	—	4,532	—	—	581,565
DIDSBURY, Mountain View Health Care Centre	608,925	88,055	—	10,000	—	—	706,980
DRAYTON VALLEY, Drayton Valley and District Health Complex	306,418	60,661	—	3,000	—	—	370,079
DRUMHELLER, Regional Health Complex	1,160,717	123,510	—	23,361	—	—	1,307,588
EDMONTON, Central Park Lodge	1,867,772	164,925	—	8,256	—	—	2,040,953

SCHEDULE D cont'd.

Nursing Home	Per Diem Support	Other Program Support	Extraordinary Maintenance	Major Equipment Grants	Capital Fund		Total
					Major Construction	Capital Upgrading	
EDMONTON, Dickinsfield Extended Care Centre	1,407,188	140,099	—	14,989	—	—	1,562,276
EDMONTON, Dr. Angus McGugan Pavilion	3,193,562	441,650	—	50,082	—	3,000	3,688,294
EDMONTON, Extendicare North	1,679,633	170,586	—	18,381	—	—	1,868,600
EDMONTON, Extendicare South	1,370,755	145,481	—	78,874	—	—	1,595,110
EDMONTON, Good Samaritan Mount Pleasant	2,577,790	255,121	—	42,157	—	—	2,875,068
EDMONTON, Good Samaritan Southgate	3,171,256	287,630	—	46,942	—	—	3,505,828
EDMONTON, Hardisty	3,076,684	279,357	—	12,330	—	—	3,368,371
EDMONTON, Jasper Place Central Park Lodge	1,455,736	114,145	—	—	—	—	1,569,881
EDMONTON, Jubilee Lodge	1,806,091	132,339	—	19,709	—	—	1,958,139
EDMONTON, Millwoods Shepherd's Care Centre	1,680,648	130,188	—	6,615	—	—	1,817,451
EDMONTON, Roger Parker Pavilion	2,083,511	201,602	—	18,211	—	—	2,303,324
EDMONTON, St. Michael's	1,701,802	148,844	—	3,532	—	—	1,854,178
EDMONTON, Venta	955,356	138,575	—	5,901	—	—	1,099,832
EDSON, Edson	733,884	89,089	—	4,920	—	—	827,893
FAIRVIEW, Fairview	601,443	85,938	—	5,460	—	—	692,841
FORT MACLEOD, Extendicare	617,784	84,499	—	4,707	—	—	706,990
FORT SASKATCHEWAN, Rivercrest Lodge	1,005,643	122,508	—	11,362	—	—	1,139,513
GRANDE PRAIRIE, Central Park Lodge	1,101,180	129,168	—	—	—	—	1,230,348
GRANDE PRAIRIE, Queen Elizabeth II	706,524	101,310	—	—	—	—	807,834
HANNA, Palliser	721,002	78,200	—	12,500	—	—	811,702
HIGH PRAIRIE, J.B. Wood	618,433	96,394	—	6,227	—	—	721,054
HIGH RIVER, High River	680,733	92,835	—	11,518	—	—	785,086
HYTHE, Hythe	307,986	70,824	—	5,071	—	—	383,881
LACOMBE, Lacombe	733,702	103,038	—	12,500	—	—	849,240
LAMONT, Lamont	473,446	71,273	—	2,472	—	—	547,191
LEDUC, Extendicare	1,158,605	124,391	—	4,884	—	—	1,287,880
LEDUC, Salem Manor	1,723,734	138,438	—	12,218	—	—	1,874,390
LETHBRIDGE, Edith Cavell	1,445,766	62,731	—	5,228	—	—	1,513,725
LETHBRIDGE, Extendicare	1,685,062	169,851	—	5,555	—	—	1,860,468

SCHEDULE D cont'd.

Nursing Home	Per Diem Support	Other Program Support	Extraordinary Maintenance	Major Equipment Grants	Capital Fund		Total
					Major Construction	Capital Upgrading	
LETHBRIDGE, Southland	2,143,035	147,135	—	45,019	—	—	2,335,189
LINDEN, Linden	551,147	60,930	—	—	—	—	612,077
LLOYDMINSTER, Dr. Cooke	1,039,515	137,398	—	40,674	—	—	1,217,587
MAYERTHORPE, Extendicare	744,766	75,616	—	7,057	—	—	827,439
MCLENNAN, Our Lady of the Lake	720,249	77,046	—	7,200	—	—	804,495
MEDICINE HAT, Central Park Lodge	1,848,944	119,746	—	4,082	—	—	1,972,772
MEDICINE HAT, Sunnyside	1,453,006	137,210	—	13,269	—	—	1,603,485
MIDNAPORE, Father Lacombe	1,411,865	146,735	—	3,262	—	—	1,561,862
OLDS, Olds	86,129	138,299	—	—	—	—	224,428
PEACE RIVER, Sutherland	1,078,726	110,085	—	2,073	—	—	1,190,884
PONOKA, Northcott Lodge	1,012,731	147,027	—	11,298	—	—	1,171,056
PROVOST, Provost Municipal Health Care Centre	736,778	98,135	—	19,153	—	—	854,066
RED DEER, Red Deer	1,688,860	123,444	—	16,250	—	—	1,828,554
RED DEER, Valley Park Manor	1,424,908	139,296	—	28,964	—	—	1,593,168
RED DEER, West Park	1,027,783	149,565	—	9,022	—	—	1,186,370
ROCKY MOUNTAIN HOUSE, Rocky Mountain House	—	—	—	—	33,401	—	33,401
ST. ALBERT, Youville	2,294,169	201,013	—	31,959	—	—	2,527,141
ST. PAUL, Extendicare	1,026,906	151,827	—	4,566	—	—	1,183,299
SHERWOOD PARK, Sherwood Park	1,442,335	108,112	—	9,707	—	—	1,560,154
SMOKY LAKE, Smoky Lake	492,467	64,237	49,576	13,529	—	—	619,809
STETTLER, Stettler	747,754	100,393	87,000	19,151	—	—	954,298
STONY PLAIN, Good Samaritan	1,323,612	144,184	—	13,500	—	—	1,481,296
STRATHMORE, Valley General Hospital	347,800	45,527	—	2,790	—	—	396,117
TABER, Taber and District Health Care Complex	580,229	88,303	—	—	—	—	668,532
TROCHU, St. Mary's	395,176	60,040	—	—	—	—	455,216
TWO HILLS, Two Hills	609,313	80,723	—	1,066	—	—	691,102
VEGREVILLE, Vegreville	570,605	92,747	—	11,305	30,339	—	704,996
VERMILION, Vermilion Health Care Complex	729,674	85,298	—	16,287	—	—	831,259
VIKING, Extendicare	909,054	115,175	—	12,380	—	—	1,036,609
VULCAN, Extendicare	560,960	68,187	—	9,540	—	—	638,687
WESTLOCK, Westlock	767,002	113,879	—	20,819	—	—	901,700
WETASKIWIN, Wetaskiwin	723,333	83,251	4,968	—	—	—	811,552
BONNYVILLE, A.H. & N.H. District #88	—	—	—	—	—	—	—
LAC ST ANNE-Whitecourt District #27	—	2,500	—	—	—	—	2,500
Total	$112,331,594	$11,842,644	$233,965	$1,100,810	$63,740	$131,027	$125,703,780

SCHEDULE E

DISTRIBUTION OF TOTAL EXPENDITURE BY OTHER FACILITIES
for the year ended March 31, 1987

Other Facilities	Operating Support	Total
CARDSTON, Blood Indian Hospital	$ 212,432	$ 212,432
CHATEH, Hay Lake Nursing Station	207,575	207,575
FORT CHIPEWYAN, Fort Chipewyan Nursing Station	149,822	149,822
FOX LAKE, Fox Lake Nursing Station	64,260	64,260
GLEICHEN, Blackfoot Indian Hospital	450,523	450,523
MEDLEY, Canadian Forces Hospital	786,702	786,702
Total	$1,871,314	$1,871,314

HOSPITALS AND MEDICAL CARE
GENERAL REVENUE FUND
STATEMENT OF EXPENDITURE BY PROGRAM AND SUB-PROGRAM
for the year ended March 31, 1987

Program Sub-Program	Funds Provided Estimates	Special Warrants	Transfers	Total Authorized	Expended	Unexpended (Over Expended)
Departmental Support Services	$ 43,864,814	$ —	$ —	$ 43,864,814	$ 40,821,954	$ 3,042,860
Health Care Insurance	501,054,000	17,900,000	—	518,954,000	506,544,762	12,409,238
Financial Assistance for Active Care						
Program Support	136,990,815	—	(49,145,721)	87,845,094	85,125,329	2,719,765
Major Medical Referral and Research Centres	255,976,657	—	21,894,065	277,870,722	277,821,783	48,939
Major Urban Medical and Referral Centres	425,359,153	—	16,714,364	442,073,517	441,983,819	89,698
Other Referral Centres	147,901,035	—	16,046	147,917,081	147,883,307	33,774
Specialized Active Care	178,942,691	—	8,505,706	187,448,397	187,436,003	12,394
Community-Based Hospital Facilities	149,028,272	—	661,130	149,689,402	149,645,620	43,782
Rural Community-Based Hospital Facilities	114,735,225	—	2,854,410	117,589,635	117,581,292	8,343
Capital Support	41,417,482	—	(1,500,000)	39,917,482	39,261,775	655,707
	1,450,351,330	—	—	1,450,351,330	1,446,738,928	3,612,402
Financial Assistance for Long-Term Chronic Care						
Program Support	14,954,467	—	(7,346,005)	7,608,462	3,828,391	3,780,071
Long-Term Chronic Care	181,759,189	—	7,270,364	189,029,553	182,253,563	6,775,990
Contracted Long-Term Chronic Care	1,891,048	—	75,641	1,966,689	1,871,314	95,375
Capital Support	1,439,430	—	—	1,439,430	1,402,185	37,245
	200,044,134	—	—	200,044,134	189,355,453	10,688,681
Financial Assistance for Supervised Personal Care						
Program Support	$ 23,081,657	$ —	$ (2,200,000)	$ 20,881,657	$ 12,076,609	$ 8,805,048
District Nursing Homes	38,324,926	—	—	38,324,926	37,988,185	336,741
Private Nursing Homes	51,035,093	—	1,400,000	52,435,093	52,066,103	368,990
Voluntary Nursing Homes	21,682,447	—	800,000	22,482,447	22,277,305	205,142
Capital Support	1,146,400	—	—	1,146,400	1,115,734	30,666
	135,270,523	—	—	135,270,523	125,523,936	9,746,587
TOTAL 1987	$2,330,584,801	$17,900,000	$ —	$2,348,484,801	$2,308,985,033	$39,499,768

HOSPITALS AND MEDICAL CARE
GENERAL REVENUE FUND
STATEMENT OF REVENUE
for the year ended March 31, 1987

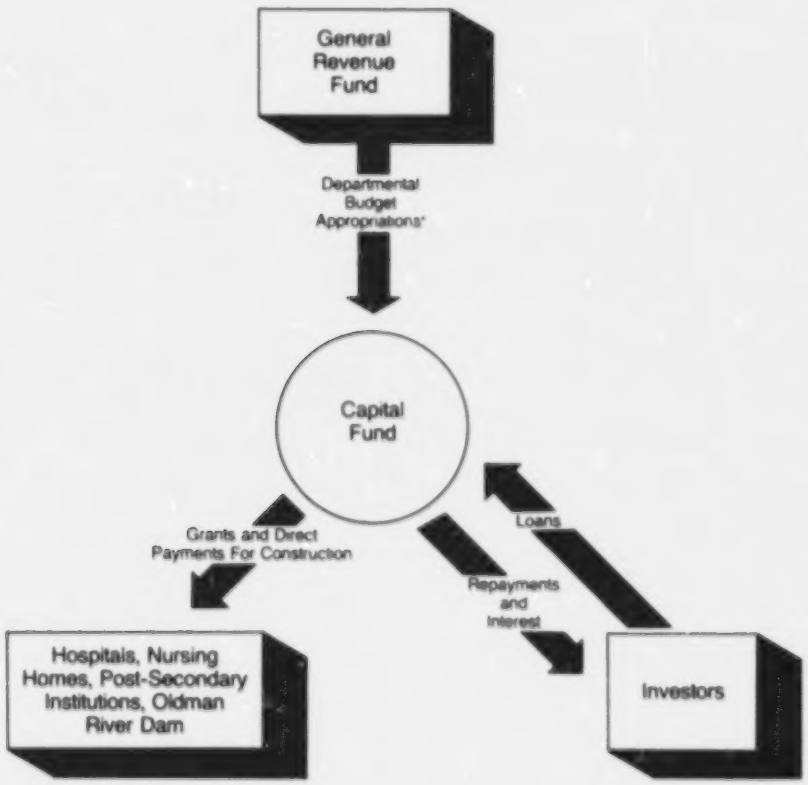
	1987
Payments from Government of Canada:	
Hospital Insurance	$349,344,496
Recovery of penalties under the Canada Health Act	28,782,000
Other	1,840,686
	379,967,182
Other Revenue:	
Refunds of expenditure:	
Previous year's refunds	8,519,868
Third party liability	4,183,645
Miscellaneous:	
Workers' Compensation Board Administration fees	180,000
Other	72,206
	12,955,719
Total Revenue	$392,922,901

ALBERTA CAPITAL FUND
Funding of Capital Construction

The Capital Fund was established in 1986/87 to enable the Province to borrow for the construction of major public facilities and pay for the costs of providing the new facilities over a period of years commensurate with the useful life of the assets. The Fund borrows the sums necessary to finance construction projects and is reimbursed through debt repayment grants appropriated from the General Revenue Fund. The accompanying chart shows the flow of funds through the Capital Fund.

Bill 30 of the Legislative Assembly of Alberta established the Capital Fund by an amendment to the Financial Administration Act. Expenditures from the Capital Fund are approved by way of a Capital Fund Appropriation Act 1987 which allows a normal budget review by the Legislative Assembly. Legislation also allows Special Warrants on the Capital Fund.

How the Capital Fund Works



*Equal to
- payments from program departments to fund projects over their useful lives, plus
- a statutory appropriation from Treasury to pay interest and other costs of debt.

ALBERTA CAPITAL FUND
HOSPITALS AND MEDICAL CARE
EXPENDITURE BY PROGRAM AND SUB-PROGRAM
for the year ended March 31, 1987

Program Sub-Program	Funds Provided Estimates	Transfers	Total Authorized	Expended	Unexpended (Over Expended)
Construction of Hospitals and Nursing Homes					
Minor Construction	$ 19,260,000	$ —	$ 19,260,000	$ 12,263,253	$ 6,996,747
Major Medical Referral and Research Centres	6,015,000	2,810,000	8,825,000	7,808,327	1,016,673
Major Urban Medical and Referral Centres	103,805,000	—	103,805,000	82,476,137	21,328,863
Other Referral Centres	38,557,000	4,200,000	42,757,000	42,706,778	50,222
Specialized Active Care	11,977,000	—	11,977,000	8,785,637	3,191,363
Community-Based Hospital Facilities (over 40 beds)	64,799,000	(2,810,000)	61,989,000	59,472,862	2,516,138
Rural Community-Based Hospital Facilities (40 beds and under)	20,429,000	(4,200,000)	16,229,000	13,375,576	2,853,424
Long-Term Chronic Care	15,922,000	—	15,922,000	10,707,854	5,214,146
Supervised Personal Care	364,000	—	364,000	63,740	300,260
	281,128,000	—	281,128,000	237,660,164	43,467,836

CONSTRUCTION OF HOSPITALS AND NURSING HOMES

Authority for Establishment of Program:

Hospitals Act
Mental Health Act
Nursing Homes Act
Department of Hospitals and Medical Care Act

Objective of Program:

To provide financial support for the planning, construction and furnishings of hospital and nursing home capital construction projects.

Program Delivery Mechanism:

The Capital Fund provides capital grants to hospitals and nursing home boards for capital construction projects and also provides capital support for direct hospital construction from funds borrowed for these purposes. Capital Fund debt is retired through debt repayment grants from supply votes of the General Revenue Fund.

ALBERTA HERITAGE SAVINGS TRUST FUND
For the year ended March 31, 1987

Applied Cancer Research

During 1986/87, the Heritage Fund continued to assist the Alberta Cancer Board. By supporting both clinical and pure research, this grant program is helping to make Alberta a centre of excellence in cancer research.

1986/87 Expenditures	$ 4,805,568

Walter C. Mackenzie Health Sciences Centre

Located at the University of Alberta in Edmonton, this state-of-art health sciences centre integrates health care, teaching and research, while promoting the physical and emotional well-being of patients. The facility includes over 800 beds and was designated as Western Canada's first heart and lung transplantation centre. The Centre also includes educational resources such as a 400 seat theatre and a medical library housing about one million volumes.

1986/87 Expenditures	$32,012,707
Total Funded from AHSTF 1986/87	$36,818,275

ALBERTA HERITAGE SAVINGS TRUST FUND

CAPITAL PROJECTS DIVISION
HOSPITALS AND MEDICAL CARE
STATEMENT OF AMOUNTS EXPENDED
for the year ended March 31, 1987

Project	Amounts Authorized	Amounts Expended	Unexpended (Over Expended)
Applied Cancer Research	$ 4,923,000	$ 4,805,568	$ 117,432
Walter C. Mackenzie Health Sciences Centre	33,500,000	32,012,707	1,487,293
	$ 38,423,000	$ 36,818,275	$ 1,604,725

HEALTH CARE INSURANCE FUND FINANCIAL STATEMENTS

Auditor's Report 56
Balance Sheet 57
Statement of Revenue and Expenditure 58
Statement of Changes in Financial Position 59
Notes to the Financial Statements 60

AUDITOR'S REPORT

To the Minister of Hospitals and
Medical Care

I have examined the balance sheet of the Health Care Insurance Fund as at March 31, 1987 and the statement of revenue and expenditure and changes in financial position for the year then ended. My examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as I considered necessary in the circumstances.

In my opinion, these financial statements present fairly the financial position of the Fund as at March 31, 1987 and the results of its operations and the changes in its financial position for the year then ended in accordance with generally accepted accounting principles applied on a basis consistent with that of the preceding year.

Donald D. Salmon

DONALD D. SALMON, C.A.
Auditor General

Edmonton, Alberta
Dated: July 31, 1986

HEALTH CARE INSURANCE FUND
BALANCE SHEET
AS AT MARCH 31, 1987

	1987	1986
ASSETS		
Current		
Cash	$ 85,590,565	$ 58,053,121
Accounts receivable (Note 3)	26,668,024	21,159,003
Due from the Province of Alberta	—	8,496,063
	$112,258,589	$ 87,708,187
LIABILITIES		
Current:		
Bank indebtedness	$ 4,664,199	$ 82,167
Accounts payable	2,439,091	1,910,956
Overpayment of Government of Canada contributions	5,714,272	—
Unexpended funds due to the Province of Alberta	12,409,238	—
Premiums received in advance	1,791,789	2,415,064
Estimated liability for unprocessed and unpresented claims (Note 4)	85,240,000	83,300,000
	$112,258,589	$ 87,708,187

The accompanying notes are part of these financial statements.

HEALTH CARE INSURANCE FUND
STATEMENT OF REVENUE AND EXPENDITURE
FOR THE YEAR ENDED MARCH 31, 1987

	1987	1986
Revenue:		
Premiums earned, net	$208,654,535	$204,718,364
Government of Canada contributions (Note 5)	115,049,504	116,186,168
Interest	4,574,858	6,011,148
	328,278,897	326,915,680
Expenditure:		
Basic health services:		
Medical	604,497,045	549,264,455
Chiropractic	23,592,183	21,524,652
Physical therapy	18,336,778	15,029,097
Oral surgery	17,855,190	13,488,049
Optometric	10,154,283	9,094,046
Podiatric	3,125,971	2,887,317
	677,561,450	611,287,616
Optional health services, Alberta Blue Cross Plan	101,009,055	87,145,508
Extended health benefits	33,539,168	29,331,987
Out of province hospital costs	19,132,250	21,939,583
Continuing medical education fund contributions	1,678,804	1,623,780
Location incentives	1,293,688	1,556,269
Disability fund contributions	609,244	—
	834,823,659	752,884,743
Excess of expenditure over revenue for the year	506,544,762	425,969,063
Deduct:		
Contributions by the Province of Alberta	506,544,762	425,969,063
	$ —	$ —

HEALTH CARE INSURANCE FUND
STATEMENT OF CHANGES IN FINANCIAL POSITION
FOR THE YEAR ENDED MARCH 31, 1987

	1987	1986
Funds were provided from:		
Advances by the Province of Alberta for current year	$518,954,000	$417,473,000
Payment by Province of Alberta for prior year receivables	8,496,063	—
Recoverable payments:		
Hospital costs, reciprocal agreements	38,732,673	35,608,734
Reimbursements from Workers' Compensation Board	12,813,784	8,453,486
Department of Community and Occupational Health sessional payments	5,251,302	5,215,219
Overpayment of Government of Canada contributions	5,714,272	—
Increase (decrease) in estimated liability for unprocessed and unpresented claims	1,940,000	(1,263,000)
Increase (decrease) in accounts payable	528,135	(2,369,208)
	592,430,229	463,118,231
Funds were applied to:		
Excess of expenditure over revenue	506,544,762	425,969,063
Payments made on behalf of:		
Hospital costs, reciprocal agreements	43,052,582	35,751,605
Workers' Compensation Board	11,954,789	9,344,808
Department of Community and Occupational Health sessional payments	5,797,602	5,092,412
Reimbursement of unexpended funds to the Province of Alberta	—	6,245,249
Increase in premiums receivable and other accounts receivable	1,501,807	477,827
Decrease (increase) in premiums received in advance	623,275	(226,305)
	569,474,817	482,654,659
Increase (decrease) in funds	22,955,412	(19,536,428)
Funds at beginning of year	57,970,954	77,507,382
Funds at end of year	$ 80,926,366	$ 57,970,954
Represented by:		
Cash	$ 85,590,565	$ 58,053,121
Bank indebtedness	(4,664,199)	(82,167)
	$ 80,926,366	$ 57,970,954

HEALTH CARE INSURANCE FUND
NOTES TO THE FINANCIAL STATEMENTS
MARCH 31, 1987

Note 1 Authority

The Health Care Insurance Fund operates under the authority of the Alberta Health Care Insurance Act, Chapter A-24, Revised Statutes of Alberta 1980.

Note 2 Significant Accounting Policies and Reporting Practices

Government of Canada Contributions

Government of Canada contributions are received pursuant to provisions of the Federal-Provincial Fiscal Arrangements and Established Programs Financing Act, 1977 (Canada) and represent amounts deemed by the Provincial Treasurer to be contributions to the Province of Alberta with respect to health care. These contributions are subject to adjustments and due to the unavailability of information regarding adjustments to previous years' contributions, or to the current year's contributions, this source of revenue is reported on the basis of amounts received during the year.

Note 3 Accounts Receivable

Accounts receivable consist of the following:

	1987	1986
Premiums, less allowance for uncollectible accounts and adjustments	$16,500,377	$14,735,348
Hospital costs, reciprocal agreements	6,577,655	2,257,746
Department of Community and Occupational Health sessional payments	2,338,133	1,791,833
Workers' Compensation Board payments	1,025,704	1,884,699
Other	226,155	489,377
	$26,668,024	$21,159,003

Note 4 Estimated Liability for Unprocessed and Unpresented Claims

The estimated liability for unprocessed and unpresented claims consists of the following:

	1987	1986
Basic health services	$61,096,000	$57,832,000
Optional health services, Alberta Blue Cross Plan	12,000,000	11,600,000
Out of province hospital costs	5,494,000	7,952,000
Extended health benefits	3,710,000	3,202,000
Location incentives	2,940,000	2,714,000
	$85,240,000	$83,300,000

The amounts pertaining to basic health services, out of province hospital costs and extended health benefits consist of actual payments during April and May for service dates prior to April 1 together with an estimated additional liability based on historical information about the relationships between service and payment dates. The amounts pertaining to optional health services, Alberta Blue Cross Plan have been determined from information provided by the Plan. The amounts for location incentives are based on claim submissions for earlier program years.

Note 5 Government of Canada Contributions

Government of Canada contributions consist of the following:

	1987	1986
Contributions pertaining to the current fiscal year	$121,231,776	$112,071,168
Adjustments pertaining to previous fiscal years	(6,182,272)	4,115,000
	$115,049,504	$116,186,168

As a result of the Province of Alberta legislating an end to extra billing by medical practitioners effective October 1, 1986, the Government of Canada refunded to the Province $22,953,000. This amount, withheld as a financial penalty pursuant to the Canada Health Act, included $5,628,000 in respect of the current year and was deposited in, and retained by, the General Revenue Fund of the Province.

Note 6 Administration Expenses

Costs incurred in the administration of the Fund have been borne by the General Revenue Fund and are not reflected in these financial statements.

Note 7 Approval of Financial Statements

These financial statements were approved by management.